



Town of Scituate Planning Board Application for Approval of a Site Plan Administrative Review (Major*) April 2016, May 2021

1. General Infor	nation	
Address of site		
Map-Block-Lot	Parcel Size (Total Area & Upland Area Zin acres)	Zoning District(s)
Please complete all of	the following:	
	eck one): WarehouseOther Business Residential business if applicable:	
Proposed Use (please c	<u>heck one):</u>	
Please describe type of	WarehouseOther Business (please explain) business: pistrict(s):	
riease provide Zoning L	15t11ct(5)	
Construction, alter	<u>please check one):</u> ss or commercial use without use of additional building o ration or enlargement of existing structure. Indicate whet a in sq. ft.:	•
	nd area occupied by business or commercial use of	(name use)
	ousiness in structure not previously used for business or o be occupied:	commercial purposes
Required information on Requirements)Number of existing	parking (required spaces must be based on 760.6 Table parking spaces	<u>e of Minimum</u>
	g spaces required by structures or uses in existence on $^\circ$	1/1/88
·	g spaces required by additional area or new use.*	., .,
	ces are required, the application is considered a Major S	Site Plan Review.
2. Applicant Che	cklist	
1) Eighteen copie	included with all applications for Site Plan Administratives of the completed application form and folded site plituate Zoning Bylaw Section 770.5 must be shown.	
2) A check made	out to the Town of Scituate for \$500 - \$750	
	of abutters from the Town of Scituate Assessor's (ngs to abutters must be delivered to the Planning B .	
4) A copy of the c	current deed and most recent tax bill showing all taxes ing dimensions, colors, wording and materials of prop ns must be included on the site plan.	•

application and plan in the c7) Information sufficient to sho Zoning Bylaw Section 770.6	w that the application meets	s the standards of review of Scituate	
3. Applicant Information			
Name			
Address			
City	State	Zip Code	
Telephone (cell phone preferred)		E-mail	
4. Owner Information			
Name			
Address			
City	State	Zip Code	
Telephone (cell phone preferred)		E-mail	
5. Applicant's Representa	tive Information		
Name	Company		
Address		<u> </u>	
City	State	Zip Code	
Business Phone	Cell phone	E-mail	
6. Signatures			
	cribed as above, hereby sub	ative Review for property with location, mits the attached plan in accordance	
Name of Applicant or Authorized Rep	resentative Signature of A	Signature of Applicant or Authorized Representative	
Name(s) of Owner(s) if different from applicant Signature of Owner if different from applicant			
The owner of the property must si	ign this form, or provide a de	eed, signed lease or Purchase & Sale	

Agreement, or an authorization for a signature by a representative, which the owner has signed.

__6) PDF files of the full application package (application form, deed, P&S is applicable, CAD File, etc.) and plan by e-mail concurrently with the physical receipt of the hard copies of the