# TOWN OF MADISON PO BOX 248 MADISON, NH 03849 603-367-4332

## **Planning Board Comprehensive Application Form**

# INSTRUCTIONS FOR SUBMISSION OF APPLICATION MATERIALS

In accordance with RSA 676:4,I(b), all materials required to constitute a complete application *shall* be submitted to the town by 12:00 Noon of the second Tuesday of the month. Planning Board meetings are held the first Wednesday of each month.

**Note**: Revised plans (four plats and one 11" x 17" copy of plat) of any type must be in the town office **7 days** prior to the hearing date.

All filing is to be done at the **Madison Town Hall, 1923 Village Road, Madison, NH 03849**, **603-367-4332**. Town Hall hours are Monday - Thursday 8am to 4pm.

By submission of this application, the applicant grants permission to the Planning Board or its agents to conduct a site inspection without notice to the applicant.

The Town of Madison Zoning Ordinance, Planning Board Subdivision Regulations, Site Plan Regulations, Excavation Regulations, and appropriate applications may be obtained through the Selectmen's Office or on the town website at www.madisonnh.org.

Please check the project included in this application and complete the appropriate pages:

- Preliminary Review Complete pages 4 & 5 (and page 6 as needed), and include:
  - Three (3) 11" x 17" copies of the proposed project
  - Filing Fee

Preliminary review is <u>required</u> prior to submission for any subdivision, boundary line adjustment, or site plan application.

- Subdivision of Land complete pages 4, 5, & 7 (and page 6 as needed), and include the following:
  - Four (4) plats prepared by a licensed New Hampshire surveyor (Any appropriate engineering drawings must be presented with the application at the Public Hearing).
  - One (1) eleven by seventeen (11"x17") copy of the plat.
  - One (1) Mylar with a mailing tube.
  - Filing Fees
  - Three (3) sets of abutter address mailing labels 1" x 2.63" (see abutter notification form)
- □ <u>Site Plan Review</u> complete pages 4, 5, & 7 (and page 6 as needed), and include the following:
  - Four (4) plats prepared by a licensed New Hampshire surveyor (Any appropriate engineering drawings must be presented with the application at the Public Hearing)
  - One (1) eleven by seventeen (11"x17") copy of the plat
  - One (1) Mylar with a mailing tube
  - Filing Fees
  - Three (3) sets of abutter address mailing labels 1" x 2.63" (see abutter notification form)
- Boundary Line Adjustment complete pages 4, 5, & 7 (and page 6 as needed), and include the following:
  - Four (4) plats prepared by a licensed New Hampshire surveyor (Any appropriate engineering drawings must be presented with the application at the Public Hearing)
  - One (1) eleven by seventeen (11"x17") copy of the plat
  - One (1) Mylar with a mailing tube
  - Filing Fees
  - Three (3) sets of abutter address mailing labels 1" x 2.63" (see abutter notification form)
- □ Scenic Road Tree Cut complete pages 4 & 5, (and page 6 as needed), and include the following:

- Detailed location and description of trees to be cut
- Filing Fees
- Voluntary Merger of Pre-Existing Lots complete pages 4 & 5, and include the following:
  - Completed "Notice of Voluntary Merger for Pre-Existing Lots" form (available on the town website and through the Selectmen's Office)
  - Filing Fee
  - copy of the deeds to the lots proposed to be merged
- Earth Excavation complete pages 4, 5, & 7 (and page 6 as needed), and include the following:
  - A copy of the completed application for submission to the Conservation Commission
  - Five (5) excavation plats prepared by a licensed New Hampshire surveyor or engineer (Any appropriate engineering drawings must be presented with the application at the Public Hearing).
  - Five (5) reclamation plats prepared by a licensed New Hampshire surveyor or engineer (Any appropriate engineering drawings must be presented with the application at the Public Hearing).
  - One (1) eleven by seventeen (11"x17") copy of the excavation plat
  - One (1) eleven by seventeen (11"x17") copy of the reclamation plat.
  - Filing Fees
  - Three (3) sets of abutter address mailing labels 1" x 2.63" (see abutter notification form)

be sch	neduled for a hearing.
1.	Name, mailing address and telephone number of <b>applicant</b> / <b>owner of record</b> . (Provide both if different.)
2.	Name, mailing address, telephone numbers (voice and fax) and email of <b>agent</b> . The agent has the authority to represent the owner of record before the Planning Board.
3.	Street Location of Subject Parcel:
4.	Tax Map: Lot:
5.	Zoning district property is located in:
6.	Overlay Districts or other regulations affecting Subject Property:  State Highway Permit: Shoreland Protection: Ground Water Protection: Scenic Roadway: State Subdivision: Current Use Tax: Others (specify)
Additio	Name, mailing address, and telephone numbers (voice and fax) of additional sionals who are authorized to submit additional materials on behalf of the application. and professionals may include, but are not limited to: NH Certified Soil Scientist, and Scientist, Surveyor, Engineer, Attorney, or other Real Estate Professional. etc.
Please	e provide a brief description of the proposed project:

Name, mailing address and telephone contacts must be supplied for an application to

### **APPLICATION FEES**

In accordance with RSA 676:4,I(g), the applicant shall pay the following fees to compensate the Town for its expenses in processing, noticing and reviewing each application. One or more fees may apply, however, only one notice fee is required except as noted below. In some instances as noted below, a separate check payable to Carroll County Register of Deeds may be required for LCHIP fees.

PRELIMINARY REVIEW Administration: \$50				
VOLUNTARY MERGER OF PR Administration: \$65	RE-EXISTING LOTS			
SUBDIVISION OF LAND				
Administration: 1. Boundary Lot Line A 2. Subdivision of Land: 3. LCHIP Fee: \$25		#lots unty Register		
Public Notice: 1. \$30 per notice; plus 2. \$12.50 per abutter o	or other party notified.	#x\$	312.50	
SITE PLAN REVIEW				
Administration: Review/F LCHIP Fee: \$25 Public Notice: 1. \$30 per notice; plus 2. \$12.50 per abutter or	(check payable to Carroll Co	unty Register		
SCENIC ROAD TREE CUT				
Administration: Review/	Filing Fee: \$75			
Public Notice: \$30 per no	otice (2 required)			
EARTH EXCAVATION Administration: Review	/Filing Fee: \$100			
Public Notice: 1. \$30 per notice; plus 2. \$12.50 per abutter or	other party notified.	#x\$	312.50	
RECORDING FEE Recording \$30 per sheet	:			
engineering, legal, and p the Madison Subdivision	he Board in reviewing the appl lanner review), as limited in RS & Site Plan Regulations, shall pard unless specifically waived	SA 676:4 and be passed thro		
TOTAL FEES SUBMITTED WI	TH APPLICATION			

	Ce	ertification & Signat	ure Pages		
1.	The applicant and/or owner and/or agent, certifies that this application is correctly completed with all required attachments and requirements and that any additional reasonable costs for engineering or professional services incurred by the Planning Board or the Town of Madison in the final subdivision process of this property shall be borne by the following party:				
	Applicant	Owner	Agent		
			fees and associated costs will result in blic hearing in accordance with RSA		
2.	The owner/agent hereby authorizes the Madison Planning Board and its agents to access the subject land for the purpose of reviewing this subdivision plan, performing road inspections and any other inspections deemed necessary by the Board or its agents, to insure conformance of the on-site improvements with the approved plan and all Town of Madison ordinances and regulations.				
3.	The undersigned owner/ Completed Application P	agent hereby submits to ackage and respectfully	the Madison Planning Board a requests its approval of said plat. In ccurring thereto, the owner hereby		
		ork made necessary by	and as shown and intended by said unforeseen conditions which become		
	- · · · · · · · · · · · · · · · · · · ·		as approved by the Town for all street		
	the plat for streets, o	drainage or other purpos	for land or rights of ways reserved on ses as agreed upon. Ition it may incur, or repairs it may make,		
	<ul> <li>because of my failur</li> <li>To make no change a revised plan or a p</li> </ul>	e to carry out any of the s whatsoever in the Final plat or new application is	e foregoing provisions.  al Plat as approved by the Board unless submitted and approved by the Board.		
	<ul> <li>insure completion of</li> <li>There are no known Planning Board Reg part of this application</li> </ul>	the improvements show violations of the Town of ulations present on the on.	ning Board's Performance Guarantee to wn on the plat and related drawings. of Madison Zoning Ordinance or Madison property that have not been disclosed as		
		undary monumentation dison Subdivision Regu	at the project's completion in accordance lations.		
Autho	orization to Act as Agent	į.			
permit	eby designated as the per	dison Planning Board fo	o act as my agent in securing any and all or the development of my property, all agent.		
Certif	ication				
Owne	Date:				

#### ABUTTER NOTIFICATION FORM

#### Instructions:

- 1. List the map, parcel, name and mailing address of the property owner and all abutters as shown in Town records per RSA 676:4,I(b). This may be typed on a separate sheet. If using another sheet or multiple sheets, please indicate the date of preparation and sign your name on each sheet.
- 2. As applicable, include the name, mailing address, daytime phone number and fax number of: the Applicant's Authorized Agent; and any surveyor, engineer, architect or soil scientist whose stamp and signature appear in the application materials. Other required abutters are detailed in RSA 676:4(I)(b).
- 3. Please attach three completed adhesive mailing labels for each entry on the list. Label size must not exceed 1" tall by 2.63" long.
- 4. The determination of abutters is the responsibility of the applicant; this list will not be reviewed for compliance with statutory requirements.

Мар	Parcel	Owner	Mailing Address
		·	
		<del></del>	
		·	
		<del></del>	
		<del></del>	
Date of p	reparation:		
I hereby o	ertify that all info	ormation presented on thi	s form is, to the best of my knowledge, correct.
Signature	of preparer:		