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Town of Westport

Planning Board 856 Main Road Westport, MA 02790

Tel: (508) 636-1037 Fax: (508) 636-1031

Application No. _____

INFORMATION FOR A PRE-APPLICATION CONSULTATION

	Date
The Planning Board encourages applicants to d and with the Board at a regularly scheduled P application. In order to most efficiently addres provide the following information and a short n prepare to meet with you.	iscuss their projects with Planning Board staff lanning Board meeting prior to submitting an s your questions, the Board requests that you
I. What type of Planning Board approval/endors	sement are you seeking?
GENERAL: Approval Not Required Plan Preliminary Subdivision Plan Definitive Subdivision Plan Open Space Residential Development SITE PLAN: Site Plan Approval	SPECIAL PERMITS: Assisted/Independent Living SP Common Driveway SP Drive -Through Facility SP Flexible Frontage SP Inclusionary Housing SP Low Impact Development SP SOLAR
OVERLAY DISTRICTS:AE-ODNOQ-ODST-OD	OTHER:
II. What are the Assessor's Map & Lot Numbers Map Lot Size	(acres or sq. ft.)
III. Owner's Name & Site Address (if applicable)IV. For Subdivisions: How many lots are you pro an Open Space Subdivision?	_
V. For Site Plans: What is the existing or former use of prop What is the name of any existing business What is the proposed use of the property?	??
VI. Are you the: Owner? Owner's Engineer/Surveyor/ Party interested in acquiring/developing the	_ _
VII. At this time I would like an appointment to s Planning Board Staff: Plan	speak with: uning Board: Both: Both:
VIII. Name:	Phone #