



Town of Westport
Planning Board
856 Main Road
Westport, MA 02790

www.westport-ma.gov
planning@westport-ma.gov

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

Form B

Application No. _____ Date _____

APPLICATION FOR APPROVAL OF A PRELIMINARY PLAN

To the Planning Board of the Town of Westport, Massachusetts:

The undersigned, being the applicant as defined under M.G.L., Chapter 41, Section 81-L, for approval of a proposed subdivision shown on plan entitled: _____

by _____
and dated _____ and described as follows: located: _____,
number of lots proposed _____, total acreage of tract _____, hereby submits said plan
as a PRELIMINARY subdivision plan in accordance with the Rules and Regulations of the Town
of Westport Planning Board and makes application to the Board for approval of said plan.

The undersigned's title to said land is derived from _____
_____, by deed dated _____ and
recorded in the Bristol County Southern District Registry of Deeds in Book _____, Page _____,
registered in the Bristol County Southern District Registry of Land Court, Certificate of
Title No. _____.

Received by Town Clerk
Westport, Massachusetts

Applicant's signature _____
Applicant's Printed Name _____
Applicant's address _____

Date _____

Applicant's phone # _____

Time _____

Applicant's e-mail _____

Signature _____

Owner's signature and address if not the applicant
or the applicant's authorization if not the owner.

Checklist of items to be submitted with application as required by Westport Planning Board
Rules and Regulations:

1. Application Fee
2. Form D.

Please note: All information should be typed, or printed legibly, not handwritten.

FORM B

PAGE TWO

A copy of the PLAN entitled _____ dated _____ for
_____ was received by the Westport Board of Health:

Date _____

Time _____

Signature _____

Application No. _____

01/17

Please note: All information should be typed, or printed legibly, not handwritten.