## Project Application Land Use Department

P.O. Box 660; 333 Calef Hwy, Barrington, NH 03825 + Phone: 603-664-5798 + Fax: 603-664-0188

Case Number:_	Number: Project Name:					Date		
		St	aff Signature required	PRIOR to submittal				
PRELIMINARY A	PPLICATION	: Preliminary C	onceptual Review _	Design Revie	w Deve	elopment of Regio	onal Impact _	
FORMAL APPLIC Subdivision Type: Site Plan Review:	Major_X_	Minor	Conventional	Conse	rvation	-		
one Flan Review.	Change of Us	Use Permit se Extens	Sign Permit ion for Site Plan or Site Plan Approval _	Subdivision Comp	ine Adjustm letion	nent Spe	cial Permit	
Project Name:	River's Pe	ak Subdivision			A	rea (Acres or S	S F) 64	
Project Address	: Boulder	Drive						
Current Zoning	District(s)	: General F	Residential reviously approved	Map(s) _	215	Lot(s)	1	
he property owner shall genda, recommendation	designate an ager is, and case reports	s, and will communi	his person (the applicant) cate all case information is project will be made	to other parties as requ	ired.	ces and public hearing	s, will receive th	
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Company	72		For		E mail:			
Address: PO Box					_ rmaii:			
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Applicant (Contact	t): Same							
Company								
Phone:			_ Fax:		_ E-mail:			
Address:								
Developer: S	ame							
Company								
Phone:			_ Fax:		E-mail:			
Address:				····				
Architect:								
Company								
Phone:			Fax:	7 man	E-mail:			
Address:								
Engineer: Bea	Ils Associates	PIIC						
Company	iio Assuciales	S I'LLU						
Phone: 583-486	0		Fax:		E-mail: SC	ole@bealsasso	ciatesnh.cor	
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Owner Signature			Applicant Signa	iuic				
Owner Signature			Applicant Signa  Date	с				