

**TOWN OF STRATFORD
PLANNING BOARD
SUB-DIVISION APPLICATION**

Date: _____

1. Application is hereby made to the Stratford Planning Board for consideration/approval of map entitled: _____
2. Sub-Division Description & Location: _____

3. Name & Address of person(s) submitting application: _____

4. Name & Address of Owner(s) of Record: _____

5. Recorded Volume & Page of parcel(s) being sub-divided: _____

6. Name(s) & Addresses of Abutters: _____

7. Name & Address of Engineer/Surveyor: _____

8. Is a Public or Private Water System to be Connected? _____
9. Is a Public or Private Sewer System to be Connected? _____
10. What are the proposed uses of the sub-divided parcel(s)? _____

11. Are there any proposed streets or highways to be considered? _____
12. Are there any structures presently on the property? _____
13. Are there any proposed structures to be constructed? _____ If Yes, How Many? _____
14. Does the owner of record own or have any interest in a partnership or corporation owning abutting property(ies)? _____
15. Has the Health Office or N.H. Water Supply and Pollution Control Commission approved sub-division for sewage disposal system(s)? _____

Stratford Sub-Division Application, Page 2:

16. Is a variance from "Rules & Regulations to Control the Sub-Division of Land" requested? _____
17. Will there be a balance of acreage retained by the owner of record if the proposed sub-division is approved? _____ If Yes, specify: _____
18. Please remit this application along with one (1) original mylar and three (3) copies of the proposed sub-division to: Stratford Planning Board

Upon receipt of this application & maps the Planning Board will proceed to arrange an abutters hearing pending approval of the Board's preliminary review.

Name of Owner of Record

Name of Engineer/Surveyor