

## TOWN OF DURHAM Planning Department

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## <u>Subdivision – Preliminary Application</u>

## **Property Information** Property address/location: Tax map #: \_\_\_\_\_; Lot #('s): \_\_\_\_\_; Size of site: \_\_\_\_\_ acres; Zoning District: . **Proposed Project** This review is for: Conceptual Consultation: \_\_\_\_\_; Design Review: \_\_\_\_\_ Number of proposed lots: \_\_\_\_\_; Will there be a new street? Yes: \_\_\_\_; No: \_\_\_\_\_ Describe proposal in general: **Property Owner** Name (include name of individual): Mailing address: \_\_\_\_\_\_ Telephone #: Email: **Applicant/Developer/Agent** (if different from property owner) Name (include name of individual): Mailing address: Telephone #: \_\_\_\_\_ Email: \_\_\_\_\_ Submission of application This application must be signed by the property owner, applicant/developer (if different from property owner), or the agent. If not by the property owner, then a separate statement from the owner is required. I hereby submit this Preliminary Subdivision application to the Town of Durham Planning Board and attest to the best of my knowledge that all of the information on this application form and in the accompanying application materials and documentation is true and accurate. Signature: