

TOWN OF CHESTER

Application for hearing before the Development Review Board

Project No: _____ Date _____ Appellant name: _____

Appellant address: _____ Landowner name: _____

Landowner address: _____

Location of property: _____ Parcel map # _____

Description of Project: _____

Type of application:

___ Conditional Use approval

___ Flood Hazard Area Review

___ Variance

___ Waiver

___ Sub-Division

___ Planned Unit Development

___ Appeal of decision of Zoning Administrator

___ Misc.

A preliminary copy of to-scale drawings or engineered plans detailing this project must accompany this application. A copy of the "Checklist" along with 7 copies of all required submittals shall be completed and submitted at least fourteen (14) days prior to the public hearing.

Applicant Signature _____ Date _____

Zoning Administrator _____ Date _____