

Town of Stockbridge
Special Permit Application

Application is hereby made to the Board of Selectmen by:

Applicant (name): _____

Applicant Signature: _____

Applicant Mailing Address: _____

On the _____ day of _____, 2____ for property shown on the Stockbridge

Assessors Map # _____, Lot # _____ Book _____, Page _____

Owner of property: _____

Owner's signature: _____

Address of property: _____

Mailing Address: _____

Description of property: _____

Present use of property: _____

Project Description: _____

Appropriate Section of Zoning Bylaw: _____

Attach six sets of scale drawings with measurements showing the existing conditions and proposed changes. Also attach six plot plans showing the locations of all structures and buildings with scaled measurements to all lot lines and between all structures, along with a total of five copies of this application.

All applications must be accompanied by six complete sets of documents, all areas of the above form must be completed, and the proper fee paid, or the application will be deemed to be incomplete and returned to the applicant.