

APPLICATION FOR SITE PLAN REVIEW

LOCATION:

Business Name: _____
 Assessor's Map# _____ Parcel# _____
 Property Address: _____

OWNER OF PROPERTY

Name: _____
 Address: _____

 Telephone: _____
 Email: _____

ARCHITECT/DEVELOPER/CONTRACTOR/ENGINEER

Name: _____
 Address: _____

 Telephone: _____
 Email: _____

STORAGE TANKS (HASMAT/FUEL OR WASTE OIL)

Existing _____	Proposed _____
Number _____	Number _____
Size _____	Size _____
Above Ground _____	Above Ground _____
Underground _____	Underground _____
Contents _____	Contents _____
_____	_____
_____	_____

UTILITIES

Sewer - Public	Private	Size _____ gal
Water - Public	Private	
Electric - Aerial	Underground	
Gas - Natural	Propane	
Grease Trap - Size _____	gal	
Sewage Daily Flow *	_____ gal	

PARKING SPACES

Required _____
 Provided _____
 On-Site _____
 Off-Site _____
 Handicapped _____

CURB CUTS

Existing _____
 Proposed _____
 To Close _____
 Totals _____

Subdivision Plan _____
 ANR Plan _____
 Site Plan _____

APPLICANT

Name: _____
 Address: _____

 Telephone: _____
 Email: _____

AGENT / ATTORNEY

Name: _____
 Address: _____

 Telephone: _____
 Fax: _____

ZONING DISTRICT CLASSIFICATIONS

District _____ Overlay(s) _____
 Lot Area _____ Sq. Ft. _____ Ac.
 Fire District _____
 Setbacks (ft.)
 Front _____ Side _____ Rear _____

Number of Buildings

Existing _____ Proposed _____
 Demolition _____

TOTAL FLOOR AREA BY USE:

Basement _____	Existing (Sq. Ft.)	Proposed (Sq. Ft.)
Residential _____		
# of Bedrooms _____		
Restaurant _____		
Retail _____		
Office _____		
Medical Office _____		
Commercial (specify) _____		
Wholesale (specify) _____		
Institutional (specify) _____		
Industrial (specify) _____		
All Other Uses On Site _____		
Gross Floor Area _____		

* GP or WP areas restrict wastewater discharge to 330 gallons per acre per day into on-site system.

Old King's Highway Regional Historic District File # _____	Approved?	Yes	No
Hyannis Main Street Waterfront Historic District File # _____	Approved?	Yes	No
Listed in National and/or State Register of Historic Places?		Yes	No
Previous Site Plan Review File # _____	Approved?	Yes	No
Previous Zoning Board of Appeals File # _____	Approved?	Yes	No
Is the site located in a Flood Area (Section 3-5.1)		Yes	No
In Area of Critical Environmental Concern?		Yes	No
Is the Project within 100' of Wetland Resource Area?		Yes	No
Site sketch – informal presentation		Yes	No
Site Plan prepared, wet stamped and signed by a Registered PE and/or PLS.		Yes	No
Parking and Traffic Circulation Plan		Yes	No
Landscape Plan and Lighting Plan		Yes	No
Drainage Plan with calculations and Utility Plan		Yes	No
Building Plans, (all floor plans, elevations and cross sections)		Yes	No

Note that all signage must be approved by Code Enforcement Office at the Building Department

Lot area in sq. ft. _____ sq. ft.
 Total Building(s) footprint _____ sq. ft.
 Maximum Lot Coverage as % of Lot _____ %

GROUND WATER PROTECTION OVERLAY DISTRICT REQUIREMENTS: DISTRICT: _____
 Lot Coverage (%) Required _____ Proposed _____
 Site Clearing (%) Required _____ Proposed _____

PRINCIPAL BUILDING
 Number of floors _____ Height: _____ ft.
FLOOR AREA:
 Basement _____ sq. ft. Second _____ sq. ft.
 First _____ sq. ft. Attic _____ sq. ft.
 Other (Specify) _____ sq. ft.

ACCESSORY BUILDING(S) Yes No
 Number of floors _____ Height: _____ ft.
FLOOR AREA:
 Basement _____ sq. ft. Second _____ sq. ft.
 First _____ sq. ft. Attic _____ sq. ft.

Please provide a brief narrative of your proposed project:

I assert that I have completed (or caused to be completed) this page and the Site Plan Review Application and that, to the best of my knowledge, the information submitted here is true.

Signature of Applicant

 Date

Printed Name of Applicant