



TOWN OF CARVER PLANNING BOARD

108 Main Street
CARVER, MASSACHUSETTS 02330
508-866-3450 Jack.Hunter@carverma.org

FORM B

APPLICATION FOR APPROVAL OF A PRELIMINARY PLAN

APPLICANT NAME: _____ FILE # _____

EMAIL: _____ DATE: _____

To The Planning Board of the Town of Carver:

The undersigned, being the applicant as defined under Chapter 41, Section 81-L, for approval of a proposed subdivision shown on a plan entitled: _____

By _____ dated _____

And described as follows: _____

Located _____, number of lots proposed

_____ total acreage of tract _____, said applicant hereby submits said plan as

Preliminary subdivision plan in accordance with the Rules and Regulations of the _____

Planning Board and makes application to the Board for approval of said plan.

The undersigned's title to said land is derived from _____

By deed dated _____ and recorded in the Plymouth District Registry of Deeds Book _____, Page _____, registered in the Plymouth Registry District of the Land Court, Certificate of Title No. _____.

Received by Town Clerk: Applicant's Signature _____

Date _____ Applicant's Address _____

Time _____ Applicant's Phone # _____

Signature _____ (Owner's Signature, _____

Address and Phone # _____

If not the Applicant) _____

Received by Board of Health:

Date _____

Time _____ Fee \$ _____ Review and Inspection \$ _____

Signature _____