

TOWN OF ROCKLAND

Planning Board

Town Hall 242 Union Street Rockland, MA 02370 Telephone: 781-871-1874 Ext. 1196

Fax: 781-871-0386

 ${\it Email: PlanningBoard@rockland-ma.gov}$

Form M Application For A Public Hearing

	Special Permit for Senior Residential Housing Special Permit for Planned Unit Development Special Permit for Conversion Building(s) in I-1 zone Special Permit – Other			
nsv	wer all of the following questions that pertain to your application:			
	Address of the property in question:			
	Name(s) of Owner(s) of Property:			
	Owner's Address:			
	Name of Applicant(s):			
	Address of Applicant:			
	Applicant's Phone:Work:			
	Cell:Fax:			
	State the Assessor's Map # and Lot # of the property.			
	State the Zoning District in which the property is located:			
	Explain in-depth what you are proposing to do:			

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- L	ist all applicable sections of the Zoning By-law that pertain to this application:
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- If	f you are applying for a dimensional variance, state in detail any specific conditions that effect the
so d	oil, topography or structures on your lot that specifically effect your lot and do not affect the zoning istrict as a whole. State why these conditions cause a hardship to the land that warrants the granting ariance (use a separate piece of paper if necessary)
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If	f this is an application for a special permit, describe in detail the permit you are seeking and provid
В	Board with specific information as to how the proposed use will meet the performance standards of coning By-laws of Rockland:

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Signe	d:		
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	Owner(s) of Record		_
	All owners must sign		
G.	•		
Signe	ea		
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	Applicant(s) If Different from owner		
	All applicants must sign		
Signe	d _:		
	Signature of Attorney (if any)		
Date:			

Thirteen (13) copies are then required before submission to the Town Clerk for date stamp.

Created:October 29, 2009