



Town of Nottingham PLANNING BOARD

P.O. Box 114, 139 Stage Road, Nottingham NH 03290
Office 603-679-9597 ext. 1, Fax 603-679-1013

APPLICATION FOR A CONDITIONAL USE PERMIT

Name of Applicant _____

Mailing Address _____

Home Phone _____ Work Phone _____ Cell _____

Name of Owner(s): _____
(if same as applicant, write "same")

PROPERTY INFORMATION

Location of property (Road(s)) _____

Tax Map(s)	Lot(s)	Sublot(s)

Lot Dimensions:	Front	Rear	Side	Side
Lot Area:	Acres		Square Feet	

Present Use of Property: _____

Proposed Use of Property _____

CONDITIONAL USE PERMIT

A Conditional Use Permit is requested per Article _____ Section _____
of the Zoning Ordinance to allow: (describe proposed use)

SUPPORTING INFORMATION

Explain how the proposal meets the criteria as specified in the above noted Article/Section of the Nottingham Zoning Ordinances:

Will the proposed be constructed in a manner compatible with the spirit and intent of the Nottingham Master Plan and Zoning Ordinance?

Detail any existing violations of the Nottingham Zoning Ordinance.

Is the site suitable for the proposed use? Address the following in your response:

- a. Adequate vehicular and pedestrian access for the intended use.*
- b. The availability of adequate public services to serve the intended use including emergency services, pedestrian facilities, schools, and other municipal services.*
- c. The absence of environmental constraints (floodplain, steep slope, etc. RSA 483:15 and RSA 483-B)*
- d. The availability of appropriate utilities to serve the intended use including water, sewage disposal, stormwater disposal, electricity, and similar utilities.*
- e. Adequacy of safety, fire and law enforcement services to respond to issues that might arise.*

Will the design of any new buildings or structures and the modification of existing building structures on the site be compatible with the established character of the neighborhood?

Describe how the proposed site, including all related development activities preserve the identified natural, cultural, historic, and scenic resources on the site and not degrade such identified resources on abutting properties.

Will the proposed project result in a greater diminution neighboring property values than would be created under any other use or development permitted in the underlying zone?

Explain how the project provides adequate and lawful facilities or arrangements for sewage disposal and solid waste disposal, water supply, utilities, drainage, and other necessary public or private services, are approved or assured, to the end that the use will be capable of proper operation.

Will the proposed use have a fiscal impact on the Town? (Detail any demand on municipal and school related services and resources).

A conditional use permit may be granted by the planning board (RSA 674:21 ii) for the construction of roads and other access ways, and for pipelines, powerlines, and other transmission lines provided that all of the following conditions are found to exist:

1. Describe how the proposed construction is essential to the productive use of land not within the wetland conservation district.

2. Detail the design and construction methods will be such as to minimize detrimental impact upon the wetland.

3. Describe how the proposed construction design of powerlines, pipelines, or other transmission lines includes provisions for restoration of the site as nearly as possible to its original grade and condition.

4. Detail what alternatives were considered.

5. Explain the economic advantage for the proposed construction. Note: Economic advantage alone is not reason for proposed construction.

I declare under penalty of perjury that all of the submitted information is true and correct to the best of my knowledge and belief. I have read and agree to abide by the regulations and conditions of approval listed on this application. I understand that my misrepresentations of submitted data may invalidate any approval of this application.

Print Applicant's Name

Signature of Applicant

Date

Print Owner's Name

Signature of Owner

Date



AUTHORIZATION TO ENTER UPON SUBJECT PROPERTY

The property owner(s), by the filing of this application, hereby give permission for the members of the Nottingham Planning Board and such agents or employees of the Town as the Nottingham Planning Board may authorize, to enter upon the property which is the subject of this application at any reasonable time for the purpose of such examinations, surveys, tests and/or inspections as may be appropriate to enable this application to be processed.

I/We hereby waive and release any claim or right I/we may now or hereafter possess against any of the above individuals as a result of any examinations, surveys, tests and/or inspections conducted on my/our property in connection with this application. This authorization expires in one year from date of signature

Property Owner(s) _____
Signature Date Signature Date

Property Owner(s) _____
Signature Date Signature Date

Property Owner(s) _____
Signature Date Signature Date

Property Owner(s) _____
Signature Date Signature Date

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plan.zone@nottingham-nh.gov
www.nottingham-nh.gov

ABUTTER(S) LIST

****PRINT THREE (3) ADDRESS LABELS PER ABUTTER- INCLUDING THE APPLICANT, OWNER AND PROFESSIONAL(S)****

(Address labels MUST BE 6.66cm x 2.54cm- same size as Avery 5160/816)

1. APPLICANT INFORMATION:

Printed Name: _____ Contact Telephone: _____

Address: _____

2. OWNER INFORMATION:

Printed Name: _____

Address: _____

3. PROFESSIONAL(S) INFORMATION:

Printed Name: _____

Address: _____

Abutter(s) Information				
4.	Map:	Lot:	Name:	Address:
5.	Map:	Lot:	Name:	Address:
6.	Map:	Lot:	Name:	Address:
7.	Map:	Lot:	Name:	Address:
8.	Map:	Lot:	Name:	Address:
9.	Map:	Lot:	Name:	Address:
10.	Map:	Lot:	Name:	Address:
11.	Map:	Lot:	Name:	Address:
12.	Map:	Lot:	Name:	Address:

I, _____, the undersigned, certify that to the best of my knowledge, the above is an
Print Applicant's name
accurate and complete abutter(s) list and that the information was obtained from the Nottingham Assessing Office no
more than five (5) days prior to the date of this application.

Applicant's Signature

Date

*****FOR DEPARTMENT USE ONLY*****

ADMINISTRATIVE DATA SUMMARY			
Case Number:	Application Received:	Fee(s) Paid:	
		Public Notice Fee:	_____
		Abutter Notice Fee:	_____
		Application Fee:	_____
Planning Department Review:	Date of Public Hearing Notice:	Planning Board Action:	
		<input type="checkbox"/> Approved _____	
		<input type="checkbox"/> Denied _____	
Planning Consultant Review:	Date of Public Hearing:	<input type="checkbox"/> Withdrawn _____	
		Registry Recording Plan Number: _____	