



**Town of Pelham Planning Board**  
351 Amherst Road, Pelham, Massachusetts 01002  
Town Office: 413-253-7129 | Town Clerk: 413-253-7129 x4

**SITE PLAN APPROVAL APPLICATION**

Applicant \_\_\_\_\_

\_\_\_\_\_

Address \_\_\_\_\_

Telephone/email \_\_\_\_\_

Property owner if other than applicant \_\_\_\_\_

Address \_\_\_\_\_

Telephone/email \_\_\_\_\_

**Planning Board Use Only**

Application received by PB (date): \_\_\_\_\_

Application complete date: \_\_\_\_\_

Referred to other boards date: \_\_\_\_\_

Boards referred to: \_\_\_\_\_

35-day referral period end date: \_\_\_\_\_

65-day PB review period end date: \_\_\_\_\_

Final PB decision date: \_\_\_\_\_

Transmit to Bldg. Ins. date (within 7 days): \_\_\_\_\_

Attorney/Engineer/Architect (if any) \_\_\_\_\_

Address \_\_\_\_\_

Telephone/email \_\_\_\_\_

**Name and Brief Description of Project (attach additional sheets if necessary)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is this site plan review part of a special permit application?      \_\_\_ Yes      No \_\_\_

Is this an amendment to a previously granted site plan?      \_\_\_ Yes      No \_\_\_

Property Address \_\_\_\_\_

Assessor Map/Parcel #s \_\_\_\_\_

Property Deed Book/Page #s \_\_\_\_\_

Zoning District \_\_\_\_\_

Applicable Bylaw Section(s) \_\_\_\_\_

(over to page 2)

**PLANNING BOARD SITE PLAN REVIEW APPLICATION (Page 2)**

**Justification for Waivers of Required Information (see Zoning Bylaw Section 125-27) :**

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**Site Planning or Mitigation Measures (attach additional materials/plans as necessary):**

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\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Signature of Property Owner(s)**

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**Town Hall and Planning Board Office Use Only**

**12 Copies filed with Town Clerk on:**\_\_\_\_\_

**Appropriate fee paid:**\_\_\_\_\_  
(Yes/No)

**Transmitted to Planning Board:**\_\_\_\_\_  
(Date)

**Signature of Town Clerk or Planning Board**\_\_\_\_\_  
(Date)