

**APPLICATION for ESTABLISHMENT OF PERFORMANCE
GUARANTEE FOR INCOMPLETE SITE IMPROVEMENTS**

Please check the appropriate box:

Subdivision

Site Plan

APPLICANT/ Name: _____

CONTACT: Address: _____

Phone Number: _____

E-mail: _____

OWNER: Name: _____

Address: _____

Phone Number: _____

*** If applicant is different than owner(s), a letter of authorization from the owner must accompany this form.**

PROJECT LOCATION: Street Address: _____

Assessors' Map: _____ Lot(s): _____

DATE OF PLAN APPROVAL: _____

DATE OF LAST REVISION: _____

INCOMPLETE SITE IMPROVEMENTS: Please complete and attach the checklist below.

TYPE OF PERFORMANCE GUARANTEE (anticipated): *Check the appropriate box:*

Tripartite Agreement

Passbook

Covenant

Surety

Other (specify): _____

SUBMITTAL REQUIREMENTS: Please complete the checklist:

Application fee made payable by check to the Town of Danvers. (\$150.00)

Completed application and any supporting documents.

(Can be submitted on CD or e-mailed to dfields@danversma.gov)

Signature of Applicant / Agent: _____ Date: _____

For Department Use Only:

Date Comments Due: _____

Date of Planning Board Hearing: _____