

**APPLICATION for REVISED PLANS
PENDING SITE PLAN APPROVAL**

**APPLICANT/
CONTACT:** Name: _____
Address: _____
Phone Number: _____
E-mail: _____

PROJECT LOCATION: Street Address: _____
Assessors' Map: _____ Lot(s): _____
Zoning District(s): _____ Lot Size: _____

DATE of ORIGINAL PLAN SUBMITTAL: _____

DATE of 1st REVISED PLANS: _____

DATE of 2nd REVISED PLANS: _____

DATE of 3rd REVISED PLANS: _____

SUBMITTAL REQUIREMENTS:

- ___ 1 Application fee made payable by check to the Town of Danvers
(\$100.00 - first revision is included in original filing fee)
- ___ 1 Completed "Revised Plans" application.
- ___ 1 Project narrative describing the proposed revision(s) and listing requested waivers.
- ___ 6 **FOLDED** and **STAPLED** copies of all plan and elevation sets to be revised.
- ___ 1 Electronic PDF format of all revised plans and/or elevations.
(Can be submitted on CD or e-mailed to dfields@danversma.gov)

Signature of Applicant / Agent: _____ **Date:** _____

<p>For Department Use Only: Date Comments Due _____ Date of Planning Board Hearing: _____</p>	<p><i>* Must be submitted at least 14 days prior to Planning Board hearing. * Incomplete filings will not be accepted.</i></p>
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