

**APPLICATION for SPECIAL PERMIT**

**APPLICANT/ CONTACT:** Name: \_\_\_\_\_  
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): \_\_\_\_\_  
Zoning District(s): \_\_\_\_\_ Lot Size: \_\_\_\_\_

**Applicable Section of Zoning Bylaw:** \_\_\_\_\_  
**Proposed Use:** \_\_\_\_\_

**PERMITS/APPROVALS:**

Attach any previous or pending decision documentation regarding the site plan to *(such as special permit, variance, finding, etc.)* received from the Planning Board, Zoning Board of Appeals, Conservation Commission, Preservation Commission, and/or Historic District Commission.

**SUBMITTAL REQUIREMENTS:**

- \_\_\_ 1 Application fee made payable by check to the Town of Danvers. (\$200.00)
- \_\_\_ 1 Completed application and all supporting documentation. *(any previous Board or Commission decisions)*
- \_\_\_ 1 Letter providing owner(s) authorization. *(if the owner is not the applicant)*
- \_\_\_ 1 Project narrative describing the proposal and listing all requested waivers.
- \_\_\_ Electronic PDF format of all plans, elevations, and applicable reports/studies.  
*(Can be submitted on CD or emailed to dfields@danversma.gov)*

**Signature of Applicant/Agent:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<p><b>For Department Use Only:</b> Date Comments Due _____ Date of Planning Board Hearing: _____</p>	<p><b>* Must be submitted 30 days prior to Planning Board hearing.</b> <b>* Incomplete filings will not be accepted.</b></p>
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