

**TOWN OF PRINCETON  
PLANNING BOARD  
SITE PLAN REVIEW APPLICATION**

Office Use Only:  
File # \_\_\_\_\_

**TO THE PLANNING BOARD OF THE TOWN OF PRINCETON**

The undersigned respectfully submits this application to the Board for a Site Plan Review.

1. The undersigned is the owner/prospective purchaser (*circle one*) of certain premises situated on the \_\_\_\_\_ side of \_\_\_\_\_ Road. This record title stands in the name of \_\_\_\_\_ whose address is \_\_\_\_\_ by a deed duly recorded in the Worcester County Registry of Deeds Book \_\_\_\_\_ Page \_\_\_\_\_, Princeton Board of Assessors Map # \_\_\_\_\_ Lot # \_\_\_\_\_.
2. Said premises are situated in a district classified under the Zoning By-Laws of the Town of Princeton as \_\_\_\_\_.
3. The following is located on the premises: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. The petitioner desires to do the following on the premises: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. The undersigned has attached the information/documentation specified in Section VI of the Procedural Rules & Regulations as it relates to Section XII of the Town of Princeton Zoning By-Laws, unless expressly excused in writing by the Planning Board.
6. The parties in interest (abutters, owners of land directly opposite on any public or private street or way, and owners of land within three-hundred (300) feet of the property line) must be certified by the Board of Assessors so that the Planning Board can notify abutters by mail.
7. The undersigned has filed—electronically and/or paper hard-copy--a copy of this application along with any additional information/documentation. The undersigned has paid the prescribed filing fee of \$100.00. The undersigned acknowledges that there may be additional expenses for any and all consultants as deemed necessary for plan review by the Board (i.e. engineering, professional planners, legal assistance, etc.), and funds shall be provided to the Board prior to the plan review of an amount as determined by estimates received by the Board's consultant(s) plus 10% for handling charges. Any funds remaining after final determination of a plan will be returned to the applicant within sixty (60) days.

**Applicant (please print):**

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Signature(s): \_\_\_\_\_

**Property Owner(s), if not Applicant (please print):**

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Signature(s): \_\_\_\_\_

Date Received: \_\_\_\_\_

\_\_\_\_\_  
Town Clerk

Answer all applicable questions fully. If space is insufficient, attach additional sheets. Please note that additional licenses or permits may be required from the Board of Selectmen or other boards or officials.