

**CHARLTON PLANNING BOARD
REDUCED FRONTAGE SPECIAL PERMIT APPLICATION**

Date: _____

Pursuant to the provisions of Section 5.13 of the Charlton Zoning Bylaw, the undersigned hereby applies to the Board for Reduced Frontage Special Permit Approval for the property identified as Assessor's Map# _____, Block _____, Lot# _____; referenced in the Registry of Deeds in Book _____ Page _____.

Applicant: _____

Address: _____

Telephone: _____ Fax: _____

Cell: _____ E-Mail: _____

Owner of Land: _____

Address: _____

Zoning District: _____

Current Land Use: _____

Proposed Land Use: _____

Total Lot Area: _____

Proposed Frontage Length: _____ Feet

Proposed Building Setback Line _____ Feet

Frontage Access Strip Portion of Lot _____ Feet

Is your project subject to the Wetlands Protection Act? _____

Signature of Applicant: _____

Signature of Property Owner: _____

Date: _____ Fee: _____

For Planning Board Use Only:

Date of Submission: _____

Date of Public Hearing: _____

Decision Due Date: _____

Date Approved: _____ with Conditions? _____

Disapproved: _____

Reduced Frontage Special Permit Approval Expiration Date: _____