HOLLIS PLANNING BOARD

Seven Monument Square Hollis, NH 03049 Tel. (603) 465-2209, Ext 108 Fax (603) 465-3701 Email: planning@hollisnh.org

PLANNING BOARD APPLICATION

Please check appropriate cat	tegory:	
MAJOR SUBDIVISION	MINOR SUBDIVISION_	LOT LINE RELOCATION
DESIGN REVIEWCON	CEPTUAL CONSULTAT	IONSITE PLAN
Date Submitted	Hearing Date	File #
Subdivision/Site Plan Name		
Property Location: Map	Lot	Street:
Owner's Name		
Address		
Signature	Tel	Email
Applicant (If Other Than Ov	wner)	
Address		
Signature	Tel	Email
Engineer/Surveyor		
Address		
Signature	Tel	Email
Permission for Planning Boa	ard On-Site Inspection	(Signature owner/agent)
Plan Purpose:	((Signature owner/agent)

Planning Board Fees for Application # / Name _____

Fees	Amount	Amoun	t /Date Paid	
Abutter / Certified	\$ **		\$/	
Recording	\$26.00 (\$24.00 + \$2.00 surch	harge)	\$/	(Additional pages - \$24.00 ea)
LCHIP (Required for all) Check made out to: Hillsbore	\$25.00 ough County Registry of Deeds	5	\$/	
Site Plan Review (full)	\$**		\$/	
(minor)	\$**		\$/	
Design Review	\$ **		\$/	
Subdivision plan/lot line	\$ ** per lot		\$/	
** See Fee Schedule				
Consultant Review Fees1			\$ 500 / 00	
	TOTAL FE	EES	\$	
Application Review &	Approval Status			
Permit Name	Approval Date		Permit Number	
State Subdivision				
Wetlands Board				
State Curb Cut				
State Site Specific				
Name				
Bond Required: yes	no			
Bond Purpose				
Bond Amount \$	Date Paid			
Deeds/Easement Documents approved by Board of Selectmen (date) N/A				
List of Deeds/Easements				
Date of Plan Acceptance				
Date of Plan Approval				
Date of Plan Signature			_	
Date of Plan Recording				
Fire Protection Requi	rements Satisfied		yes1	no
Site Engineering Insp Inspection Fee Amou		Paid	yes	no

¹ Consultant Review Fees will be required for all applications including Conceptual review. Anticipated costs should be discussed with the Planning Staff prior to application submittal. Rev: 9/2015

HOLLIS PLANNING DEPARTMENT FEE SCHEDULE

Subdivision Application	s Fee		Abutter N	Notification		
Conceptual Review	\$100.00 Flat F	ee *	Regular Ma	ail		
Design Review	\$75.00 Flat Fe	e *	Certified M	ail		
Lot Line Adjustment	\$75.00 Flat Fe	e *	Certified M	ail		
Subdivision	\$75.00 per ne	w lot *	Certified M	ail		
Mapping Fees	\$25.00 per lot	*	N/A			
ite Plan Applications	Fee		Abutter I	Notification		
Conceptual Review	No Fee – Appli	ication *	Regular Ma	ail		
Design Review	\$100.00 Flat F	ee *	Certified M	1ail		
Minor Site Plan	\$100.00 Flat F	ee *	Certified M	1ail		
Major Site Plan	\$200.00 Flat F	ee *	Certified M	1ail		
Certified Mail	current postal	rate				
Certified Mail	current postal rate					
Regular Mail Notificati	on current postal	rate				
Recording	Fee					
• Plans	A. 8.5 x 11 = \$ 9.00	+ \$2.00 surcha	arge (1 st pg)	(NH RSA 478:17-	j)	
LCHIP fee		B. 11 x 17 = \$ 9.00 + \$2.00 surcharge (1 st pg) (NH RSA 478:17-j)				
Under RSA479:17g,I-a(a)	C. 17 x 22 = $14.00 + 2.00$ surcharge (1 st pg) (NH RSA 478:17-j)					
\$25.00 due on a separate check made out to:	D. $22 \times 34 = $24.00 + 2.00 surcharge $(1^{st}pg)$ (NH RSA 478:17-j) (each additional 22 x 34 pg. recorded is: \$24.00-no additional surcharge)					
Hillsborough County		Checks made out to:				
Registry of Deeds.		gh County Reg		eds.		
Documents	Per HCRD					
Other Fees	Fee		Abutter I	Notification		
Scenic Road Hearing		\$50.00 + Adv	ertising	Certified Mail		
Regional Impact Hearing		\$50.00 + Adv	ertising	Certified Mail	ertified Mail	
Miscellaneous Applica	-	\$75.00 Flat F	ee Varies			
* Consultant /Conceptual /Final Review		\$500.00 (unle arrangement w/planner)	•	Regular Mail		

Rev: 1/2017

WAIVER REQUEST – SITE PLAN REVIEW REGULATIONS

Project Name				
Street Address:				Map/Lot:
I (name)		_ hereby	request that	the Planning Board waive the
requirements of Section	_Subsection	of the	Site Plan Regu	lations, to the plan presented by
(name of surveyor or engineer)				, dated, job
or project number	_, in the Town of H	Hollis.		
Strict conformity would pose an to the spirit and intent of the re		rdship to	the applicant a	nd waiver would not be contrary
<u>OR</u> : Specific circumstances related the waiver will properly carry on th	•			nd in such site plan, indicate that
I acknowledge, as the applicant, that this waiver is requested in accordance with the provisions set forth in RSA 674:44 III (e) [Site Plan Review Regulations].				
Signature – Applicant or Author	ized Agent:			Date:
Planning Board Action – Site Plan Review Regulations Waiver				
	Granted	Not Gr	anted	
	Date:			

WAIVER REQUEST – SUBDIVISION REGULATIONS

Project Name				
Street Address: Map/Lot:				
I (name) Board waive	the			
requirements of Section Subsection of the Subdivision Regulations, to the plan prese	nted			
by (name of surveyor or engineer), dated,	,			
job or project number, in the Town of Hollis.				
Strict conformity would pose an unnecessary hardship to the applicant and waiver would not be cont to the spirit and intent of the regulations.	trary			
<u>OR</u> : Specific circumstances relative to the site plan, or conditions of the land in such site plan, indicate the waiver will properly carry out the spirit and intent of the regulations.	that			
I acknowledge, as the applicant, that this waiver is requested in accordance with the provisions set f in RSA 674:36 II (n) [Subdivision Regulations].	forth			
Signature – Applicant or Authorized Agent: Date:				
Planning Board Action – Regulations Waiver				
Granted Not Granted				
Date:				