

Official use only						
Planning Board		Town Clerk/ Town Collector				
Complete Application	Y / N		Time Stamp			
Certified Abbutters list	Y / N					
# of Blue Line Plans attached						
Zoning permit	Y / N	Fee	Cashcheck #Charge MC/ VISA			
Required Fee	\$175	Taxes	Paid in Full Due			

Town of Southwick-Special Permit Application Zoning-Chapter 185

File two completed forms with all necessary attachments to the Planning Board for a review of content in accordance with all the requirements set forth in the Southwick Zoning Bylaw (Ch 185) and M.G L. (Ch 40A). All complete applications must include a certified abutters list, a zoning permit and 7 copies of surveyed stamped plans. Application with all required attachments and required fee MUST then be time stamped with the Town Clerk.

Tax Collector will then note any tax delinquency on property in question.

Check ALL sections for which this application pertains							
185-11	AC	Single family homes					
185-14	R-20-A		Residential apartment houses				
185-15	R- 20-B		Housing for elderly persons and/or handicapped persons				
185-17	BR		All uses (except banks)				
185-19	IR		All uses (except printing engraving & bookbinding)				
185-20	FH & WD		All uses				
185-21	Estate Lot		Single family dwelling (all zones)				
185-22	Wellhead		All uses				
185-23	FRD		Residential Developments				
185-23.1	Wireless		Cell tower				
	Other						
Applicant	Applicant Information:						
Name:							
Mailing Addre							
Telephone / E-mail		(Home)	(Work)				
		(Cell)	(e-mail)				
D	. ((!						
	nformation:						
Street Address:		-					
Assessor's Map:		Map #	Parcel #				
-	County Registry of						
Deeds:		Book #	Page #				
Property Owner(s) Information: (if different than applicant)							
Name:							
Mailing Address:							
Telephone		(Home)	(Work)				

Site Plan Information: Title of Plan:	Date:		
Name of Surveyor:			
Mailing Address:			
Project information:			
Current Zoning:	Circle all that apply to property:		
(including overlays)	AC / R-40 / R-20A / R-20B / BR/ I / IR / FH&WD / Wellhead / Wireless		
	mpleted Zoning Permit, signed by the Zoning Enforcement Officer, be attached to and shall be considered part of, this application		
Current Use(s) & Structures:	Provide a detailed description of all uses, details pertaining to any issued permits &		
Current Ose(s) & Structures.	variances and details of current structures on property		
Proposed Use(s) & Structures:	Provide a detailed description of all proposed uses, including all modifications to existing structures and uses and all proposed structures, uses and features to be added to the site as it is at the date of application		
Applicant's Representat	ve or Agent:		
Name/ title:			
Company:			
Address:			
Telephone	(Office) (Fax)		
Required Signatures:			
	Date:		
Signature of Applicant (s):	Date:		
	Date:		
Signature of applicant's	Date:		
representative (s):	Date:		
	Date:		
	Date: Date:		
Signature of property owner (s)	Date:		
	Date:		