



## ***Town of Marshfield***

870 Moraine Street  
Marshfield, Massachusetts 02050-3498

Planning Board

*Tel:* 781-834-5554

*Fax:* 781-837-7163

### **SPECIAL PERMIT APPLICATION**

#### **OPEN SPACE RESIDENTIAL DEVELOPMENT**

Please submit one completed application form with the Planning Board and one copy with the Town Clerk.

1. Name of Applicant \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone # \_\_\_\_\_  
E-mail \_\_\_\_\_ Fax # \_\_\_\_\_
2. Name of Engineer or Surveyor \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone # \_\_\_\_\_  
E-mail \_\_\_\_\_ Fax # \_\_\_\_\_
3. Deed of property recorded in \_\_\_\_\_ Registry,  
Book \_\_\_\_\_ Page \_\_\_\_\_
4. Assessor's Map: \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_
5. Street address of property: \_\_\_\_\_
6. Number of Lots \_\_\_\_\_
7. Projected area: \_\_\_\_\_ Acres
8. Area Preserved as Open Space: \_\_\_\_\_ Acres
9. Is Town Water Available? \_\_\_\_\_
10. Is Town Sewer Available? \_\_\_\_\_

Name of Proposed Development: \_\_\_\_\_

Number of Lots \_\_\_\_\_ Zoning District(s) \_\_\_\_\_

Proposed Street Name(s) \_\_\_\_\_

Signature and Address of Owner(s) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_