



# BELLINGHAM PLANNING BOARD

5 COMMON STREET  
BELLINGHAM, MASSACHUSETTS 02019  
(508) 966-0991; FAX (508) 966-2317  
[PlanningBoard@bellinghamma.org](mailto:PlanningBoard@bellinghamma.org)

## APPLICATION FOR SITE PLAN APPROVAL UNDER THE ZONING BYLAW

Date Submitted: \_\_\_\_\_

**1. Applicant**

Address

Phone

Email

**2. Owner(s)**

Address

Phone

Email

**3. Engineer**

Address

Phone

Email

**4. Plan Title**

**5. Date of Plan**

**6. Location of Premises (Address,  
Street Name, or general property  
description)**

**7. Assessors Map/Lot Numbers**

**8. Norfolk Registry of Deeds  
Book/Page**

**9. Lot Area (sq. ft & acres)**

**10. Zoning District(s)**

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**11. Premises in Overlay District(s)?**

- Water Resource District
- Flood Plain
- N/A

**12. Proposed Use**

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**13. Square Footage of Proposed Building(s)**

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**14. Impervious Surfaces (sf)**

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**15. Amount of Land Disturbance (sf)**

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**16. Number of Parking Spaces/Handicap spaces**

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**17. Accompaniments**

- Fully Executed Form K
- Certified Abutters List (1 copy, 1 label copy)
- Filing Fee (See Procedural Rules)
- Plot plan showing location of existing and proposed Buildings, signs, other structures (number of copies per Form K)
- Recorded (or surveyor endorsed) plan of land (number of copies per Form K)
- Other materials required by Planning Board/Town Planner (see Procedural Rules and Zoning Bylaws)

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***Signature of Applicant***

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***Signature of Owner(s) (if not applicant)***  
***\*All owners must sign\****

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