

HAMILTON BOARD OF HEALTH

DEFINITIVE SUBDIVISION APPLICATION

RE: DEFINITIVE SUBDIVISION PLANS

PURSUANT TO THE PROVISIONS OF G.L. CHAPTER 41, SECTION 81U, A COPY OF THE PLAN DESCRIBED BELOW IS HEREWITH FILED WITH YOU FOR APPROVAL UNDER THE SUBDIVISION CONTROL LAW.

EXACT TITLE OF PLAN

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DATE OF PLAN \_\_\_\_\_ DESIGNER \_\_\_\_\_

NAME AND ADDRESS OF RECORD OWNER OF LAND \_\_\_\_\_

ASSESSORS MAP NUMBER(S) \_\_\_\_\_ STREET \_\_\_\_\_ LOTS \_\_\_\_\_

LOCATION AND DESCRIPTION OF LAND \_\_\_\_\_

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NO. OF LOTS \_\_\_\_\_ SIZE OF LOTS \_\_\_\_\_  
(Minimum) (Maximum)

NAME OF APPLICANT

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ADDRESS \_\_\_\_\_ Telephone \_\_\_\_\_

DATE OF SUBMISSION OF PLAN TO BOARD OF HEALTH \_\_\_\_\_

DATE OF SUBMISSION OF PLAN TO PLANNING BOARD \_\_\_\_\_

DATE OF SUBMISSION OF PLAN TO TOWN CLERK \_\_\_\_\_

\_\_\_\_\_  
(Signature of Applicant(s))