



Planning Board Town of Ayer, MA

1 Main Street
Ayer, MA 01432

Tel: (978) 772-8218 | Fax: (978) 772-3017 | planning@ayer.ma.us

FORM C APPLICATION FOR APPROVAL OF DEFINITIVE PLAN

Date _____

To the Planning Board of the Town of Ayer, MA,

The undersigned, being the applicant as defined under Chapter 41, Section 81-L, for approval of a proposed subdivision shown on a plan entitled _____

prepared by _____ dated _____ and described as follows:

Located: _____

Assessor's Map(s) and Parcel(s): _____

Number of Lots Proposed: _____

Total acreage of Tract: _____

Hereby submits said plan as a DEFINITIVE plan in accordance with the Rules and Regulations of the Ayer Planning Board and makes application to the Board for approval of said plan.

The undersigned's title to said land is derived under deed from _____
_____ dated _____, and recorded in the Middlesex
Registry of Deeds Book and Page:

or by Land Court Certificate of Title No. _____ registered in
Middlesex County, and said land is free of encumbrances except for the following:

Said plan has/has not (*circle applicable*) evolved from a preliminary plan submitted to the Board on _____ and approved/approved with modifications/disapproved (*circle applicable*) on _____. The undersigned hereby applies for approval of said DEFINITIVE plan by the Board, in belief that the plan conforms to the Board's Rules and Regulations.

Received by Planning Board Date _____ Time _____ Signature _____	Applicant's Signature _____ Signature and address if not the applicant or applicant's authorization if not the owner _____
Received by Board of Health Date _____ Time _____ Signature _____	Date _____ Applicant Telephone - H W C _____
Received by Town Clerk Date _____ Time _____ Signature _____	Applicant E-Mail: _____ @ _____

Check List of Items to be submitted with application:

1. ☐ One (1) original and twelve (12) copies of the Definitive Plan (1"=40') which shall be distributed as follows: Planning Board (5), Planning Director, Assessor, Board of Health, Building Inspector, Public Works, Conservation Commission, and Selectmen. Copies of the definitive plan shall be submitted at full size as per the standards in Section III, PROCEDURE FOR THE SUBMISSION AND APPROVAL OF PLANS of the Town of Ayer Subdivision Control Regulations.
2. ☐ A properly completed and signed Form C
3. ☐ A filing fee consistent with the fee schedule (see Section 4 of the Rules and Regulations Governing the Subdivision of Land and Site Plans).
4. ☐ Twelve (12) copies of all plans, profiles, and cross-sections, showing proposed design and location of streets, sidewalks, drainage, landscaping, and utilities.
5. ☐ The applicant shall file by delivery or registered mail a notice with the Town Clerk stating the date of submission of the Definitive Plan and accompanied by a copy of the completed application form (Form C).
6. ☐ The applicant shall submit to the Ayer Board of Health one (1) copy of the Definitive Plan and any additional material needed by the Board of Health.
7. ☐ The applicant shall submit two (2) copies of the subdivision plan prepared at a scale of 1" = 100'. The plan shall include the lot numbers and lot areas in acres. Distances and bearings need not be shown.
8. ☐ Two (2) copies of drainage calculations stamped and signed by an engineer along with a topographic plan delineating contributing areas.

9. ☐ A Municipal Lien Certificate from the Town Treasurer, indicating that all taxes, assessments, and charges have been paid in full. The applicant shall be responsible for the cost of obtaining such certificate.
10. ☐ A list a waivers from these regulations consistent with Section VI, ADMINISTRATION, if applicable.
11. ☐ A computer CD, DVD, or Memory Stick containing a file of the subdivision in either .DWG or .DXF file format plus all other application materials.
12. ☐ Three (3) proposed street names shall be submitted for each street. Duplicate street names or names similar to existing street names shall not be considered.

If any items have not been submitted explain the reason(s) below:

OWNER/APPLICANT INFORMATION

	Owner/Applicant	Land Surveyor	Attorney
Name			
Mass. Registration #			
Name of Firm			
Mailing Address			
Telephone # 1			
Telephone # 2			
FAX #			
E-Mail			