

TOWN OF BERKLEY PLANNING BOARD 1 No. Main St. Berkley, MA 02779

MODIFICATION TO A PREVIOUSLY APPROVED SPECIAL PERMIT

APPLICANT: Developer D Property Owner D Business Owner Tenant/Leasee Buyer

Name:		
Address:		
Telephone Number:		Email:
OWNER: Name:		
Address:		
Telephone Number:		Email:
If applicant is different than	n owner, a Notarized Letter of A	uthorization from the owner must accompany this form.
PROJECT CONTACT:	Name:	
	Address:	
	Telephone #:	Email:
PROJECT LOCATION:	-	
		Lot(s):
		Lot Size:
	Recorded Plans: Book	Page(s)
attach copies of decisions.	n / Special Permit)	s, identify dates of previous and/ or pending approvals
□ Historic District Comm	nission:	
\square Board of Health:		
□ Board of Selectmen:		
Signature of Applicant /	Agent:	Date:
Signature by applicant/ agent and Procedures.	t acknowledges receipt and acc	eptance of the Planning Board's Site Plan Regulation
For Department Use Only	y:	
Date Complete Filing Received:		_ Reviewed by:
Date Hearing Scheduled:		Planning Board Action by:

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