

DATE RECEIVED: _____ FILE UNDER: _____

**JACKSON PLANNING BOARD
JACKSON, NEW HAMPSHIRE**

APPLICATION FOR SUBDIVISION OF LAND

Note: This form and all required information must be filed with and received by the Chair of the Planning Board at least 15 full days before the date of the meeting at which it is to be submitted to the Board. Filing is to be done at the Town Offices, Main Street, Jackson.

1. Name, mailing address and telephone number of the Applicant:

2. Name, mailing address and telephone number of owner(s) if other than the Applicant:

3. Location of Proposed Subdivision: _____

4. Town of Jackson Tax Map Number _____, Lot Number _____

5. Name of Proposed Subdivision (should match Subdivision Name on Title Box of Survey Plan):

6. Number of Lots and/or Units for which approval is sought: Lots _____, Units _____

7. Type(s) of Dwellings proposed in the Subdivision (check one or more than one):

Single-Family Duplex Multi-Family Cluster Condominiums

8. State of NH Dept. of Environmental Services Wetlands S.P.C.D. Subdivision No. (if applicable):

9. Name, mailing address and telephone number of the Surveyor and/or Agent:

10. Abutters: Attach a separate sheet listing the Town of Jackson Tax Map, Lot Number, Name and Mailing Address of the Subdivider and all abutters, including those across any street, brook or stream. Names should be those of all current owners as recorded in the Town of Jackson Tax Records five (5) days prior to the submission of this application. *Note: failure to list all abutters may cause significant delay in the processing of this application.*
11. The Subdivision Checklist must be filed out by the applicant or applicant's surveyor and submitted herewith.

12. Payment of all applicable fees. *Asterisk(*) indicates payment which must accompany application:*

Filing Fee for Major Subdivision*	\$200.
Filing Fee for Each Lot, Condominium or Time-Share Unit*	\$ 30.
Filing Fee for Common Land, per acre*	\$ 10.

Filing Fee for Minor Subdivision (3 lots or fewer), Lot Line Adjustment or Boundary Line Adjustment*	\$ 75.
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Also: (1) Check payable to the Town of Jackson to cover:

Recording Fee at Carroll County Registry of Deeds	\$ 40.
Posting and Publication of Notices*	\$ 24.
Secretary's Time*	\$ 35.

Note: additional costs may be billed for Special Investigative Study Costs or Legal Opinions

(2) Check payable to: Postmaster, Jackson to cover:
Abutter Notification, plus two (owner and engineer or surveyor*): *at current rate for certified mail, return receipt*, for each letter

(3) Check payable to Carroll County Registry of Deeds for L-CHIP fee* \$25

The Applicant (owner or agent) hereby certifies that this application is correctly and fully completed with all required attachments and necessary preliminary requirements met, and that any additional costs for engineering or professional services incurred by the Planning Board or the Town of Jackson in processing this application shall be borne by the applicant and/or owner.

Date: _____ Applicant (s): _____

"I hereby authorize the Jackson Planning Board and its agents to access my land for the purpose of reviewing this Subdivision plan, performing road inspections, and any other inspections deemed necessary by the Board or its agents, to ensure compliance of the on-site improvements with the approved plan and conformance with the Town of Jackson's ordinances and regulations."

Date: _____ Owners (s): _____
