

**APPLICATION FOR MINOR SUBDIVISION
PLAT REVIEW (Three lots or less)**

CITY OF SOMERSWORTH, NEW HAMPSHIRE

INSTRUCTIONS

If deemed necessary by the Office of Planning & Community Development, prior to submission of an application for minor subdivision review, the applicant shall meet with the Site Review Technical Committee (SRTC). Said meeting shall serve to assist the applicant in preparing a subdivision proposal that technically conforms to all pertinent ordinances and regulations. The SRTC generally meets the first and second Wednesday of each month.

In order to be placed on the Planning Board agenda, a complete application must be submitted to the Office of Planning & Community Development, by 12:00 p.m. on the day of the application deadline per our Planning Board meeting schedule. The Planning Board meets the third Wednesday of each month. The applicant or a duly authorized representative must attend the Planning Board meeting to present the application.

The subdivision review process is described more fully in the City of Somersworth Subdivision Regulations, copies of, which are available in the Development Services Department.

Please direct any questions to the Development Services Department at 603-692-9519, City Hall, One Government Way, Somersworth, NH 03878.

City website: www.somersworthnh.gov

**APPLICATION FOR MINOR SUBDIVISION PLAT REVIEW
CITY OF SOMERSWORTH, NEW HAMPSHIRE**

(Do not write in this space)

Date Received: _____

Fee Paid: \$ _____

Case Number: _____

1. Location of property: _____

2. Assessor's Map: _____ Lot: _____ Zoning District: _____

3. Property owner: _____

Address (Street/City/State/Zip): _____

Telephone & Email: _____

4. Applicant (if different than owner): _____

5. Address (Street/City/State/Zip): _____

Telephone & Email: _____

6. Agent: _____

Address: _____

Telephone & Email: _____

7. Description of proposed subdivision (please be as complete as possible):

6. SUBDIVISION PLAT REQUIREMENTS: Please contact the Office of Planning & Community Development for the number of plans to be submitted. Please submit one set of plans in a size not to exceed 24"x36" and the remaining plans 11"x17". The plat shall include the following information

MINOR SUBDIVISION (Three lots or less)

Applicant

(Check Before Submission)

- ____ A. Name of subdivision, name and address of owner of record, land surveyor (stamp and license number) and name and seal of engineer, if any;
- ____ B. Date, bar graph scale not to exceed fifty feet (50') to the inch, north arrow; and approved title block in lower right hand corner, denoting type of application, Somersworth tax map and lot number, county, name of municipality and street location;
- ____ C. Names and corresponding map and lot numbers of abutting property owners;
- ____ D. A signature block to be used by the City at the time of final endorsement of the plat;
- ____ E. Locations, names, and widths of existing streets, boundary lines of the subdivision and all lots, location of buildings, easements (including required site triangle easements), right-of-way, with accurate distances, true bearings, angles and curve data. All dimensions shall be shown in feet and decimals of a foot;
- ____ F. Accurate location and description of all monuments to be set at street intersections, points of curvature, tangency of curved streets and at angles of lots;
- ____ G. The area of all lots, in square feet, noted thereon; Lots shall be numbered consecutively, in accordance with the requirements of the Somersworth Assessing Department;
- ____ H. If applicable, proposed location of all utilities such as existing and proposed water mains, sanitary sewers or individual sewage disposal systems including location of soil percolation test pits;
- ____ I. If applicable, copies and/or delineation of existing or proposed covenants and deed restrictions;
- ____ J. Boundaries of zoning districts lying within the subdivision, municipal boundary, if any. A list of applicable zoning provisions including minimum setback requirements. A list of variances or special exceptions granted or approved;
- ____ K. If applicable, the boundaries of the 100-year flood plain as indicated on the Federal Flood Insurance Rate Maps (FIRM), the City of Somersworth Aquifer Protection District and the City of Somersworth Wetland Conservation Overlay District, as outlined in the Zoning Ordinance;
- ____ L. A location map drawn to scale of 1" = 1000' showing the entire subdivision and its relation to the surrounding area within a radius of 3,000 feet; said map shall delineate all streets and other relevant physical natural features;

____ M. Evidence that all necessary State permits have been received or are pending; and

____ N. Any revision(s) to the original plat must include the date and description of the revision(s).

7. THE FOLLOWING FEE SCHEDULE SHALL APPLY TO MINOR SUBDIVISIONS:

Fee Per Lot	\$75.00
Per Direct Abutter	current rate for certified mail
Per 200' Abutter	current rate for first class mail

I hereby apply for Subdivision Plat Review and acknowledge I will comply with all the ordinances of the City of Somersworth, as well as stipulations of the Planning Board, in the development of this subdivision. I understand, that if any of the subdivision plat application specifications are incomplete, the application may be considered rejected.

Signature of Owner

Signature of Applicant

LIST OF ABUTTERS FOR

Project location:_____

Owner name, address (including City, State and ZIP Code) and phone number:_____

List the names, mailing addresses, and map and lot numbers of the owner(s) of record of all abutters, including persons whose property is separated from the property in question by a street or stream. Please attach additional pages if necessary.

Map	Lot	Owner Name	Mailing Address	Indirect/Direct

Please list any other parties affiliated with the application that are not abutters, such as engineers, surveyors, attorneys, etc.

Name	Affiliation	Mailing Address

I, the undersigned, acknowledge that it is the responsibility of the applicant or his/her agent to fill out this form completely and submit to the Department of Development Services by the application deadline. I certify that the names and addresses listed above have been verified against the City of Somersworth ASSESSPRO database on _____(date).

Applicant or Agent signature:_____