

COMPREHENSIVE PERMIT
APPLICATION FORM

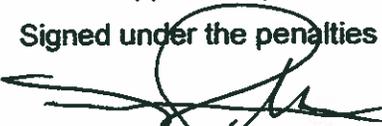
Refer to the "Rules and Regulations for Comprehensive Permits" available from the office of the Board of Appeals for detailed permit filing requirements. Contact the Building Department at 264-9632 with any questions. Incomplete applications may be denied.

(Please type or print your application)

1. Street Address of Site 99 Parker Street
Name of Proposed Development Parker Street
2. Applicant's Name Mark Starr
Address 22 Elm St., Acton, MA 01720
Telephone 978 263-0795 Fax _____ e-mail markstarrdev@verizon
3. Record Owner Name Jeanne Potter
Address: 99 Parker St
Telephone _____
4. Zoning District(s) of Parcel(s) R4 Residential
Town Atlas Map(s)/ Parcel Number(s) Middlesex Registry of Deeds Book 24587, P
- 5 a) Total development site area 1.42 a) Number of dwelling units 5
c) Number of affordable units 2 d) Number of units accessible/
e) Total open space area 1 a) adaptable for persons w/ disabilities 1
g) Total length of road(s) public _____ ft private _____ ft
i) Method of wastewater disposal Public Sewer

The undersigned hereby apply to the Planning Board for a Comprehensive Permit under M.G.L. c. 40B, §§ 20-23. The undersigned hereby certify that the information on this application and plans submitted herewith are correct, and that, to the best of his/her knowledge, the application complies with all applicable provisions of Law and Regulations.

Signed under the penalties of perjury in accordance with M.G.L. c. 268, § 1A.


Signature of Petitioner(s)

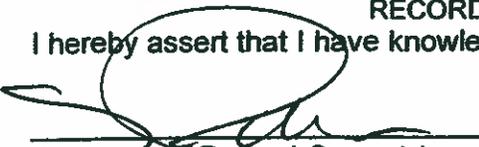
5/10/2010
Date


Signature of Petitioner(s)

5/10/2010
Date

RECORD OWNER'S KNOWLEDGE AND CONSENT

I hereby assert that I have knowledge of and give my consent to the application presented above.


Signature of Record Owner(s)

5/10/2010
Date

Signature of Record Owner(s)

Date