

Town of Sutton
Planning Department
4 Uxbridge Road
Sutton, Massachusetts 01590
508-865-8729
https://www.suttonma.org/planning-board

APPLICATION FOR WAIVER OF SITE PLAN REVIEW

APPLICANT & PROPERTY OWNER INFORMATION

NAME:	
STREET:	CITY/TOWN:
STATE: ZIP: PHONE:	EMAIL:
	TY OWNER (if different from Applicant):
SITE INFORMATION:	
STREET AND NUMBER:	
ZONING DISTRICT: ASSESSOR'S	S MAP: LOT #(S) DEED INFO BOOK: PAGE:
LOT SIZE: FRONTAGE:	
CURRENT USE:	
PROJECT/PLAN INFORMATION:	
PLAN TITLE:	
PREPARED BY (name/address/contact info):	
DATE PREPARED REVISIO	ON DATE(S)
PROJECT DESCRIPTION/REASONING FOR WAIVE	ER:
APPLICANT'S SIGNATURE	DATE
PROPERTY OWNER'S SIGNATURE (if not Applica	nnt) DATE