

OFFICE OF
BOARD OF ASSESSORS



MUNICIPAL CENTER
4 Uxbridge Road
Sutton, MA 01590-1702
Telephone (508) 865-8722
Fax (508) 865-8721

Request for Abutters List

Date of Request: _____ Date List Needed: _____

Requested by: _____ Phone: _____

Name of Property Owner: _____

Street Address of Property: _____

Map: _____ Block: _____ Lot: _____

REASON FOR LIST:

Hearing before the Zoning Board of Appeals Yes _____ No _____

Hearing before the Planning Board Yes _____ No _____

Hearing before the Conservation Commission Yes _____ No _____

Hearing before the Select Board Yes _____ No _____

Other: _____

REASON FOR HEARING - (please check)

Varlance _____ Scenic Road _____ Title 5 _____ Special Permit _____ Subdivision _____

Pole Hearing _____ Other: _____

RADIUS FOR ABUTTERS - (please check one)

Immediate _____ 300 Feet _____ Upon, along, across or under: _____

LABELS

Two Sets of Labels will be provided if needed: Yes _____ No _____
(Planning Board requires 2 sets of Labels)