



Town of Dartmouth

Office of the Zoning Board of Appeals
400 Slocum Road, Dartmouth, MA 02747
Telephone (508) 910-1868 ♦ Fax (508) 910-1833

AMENDMENT APPLICATION SPECIAL PERMIT/VARIANCE

CASE # _____
(Assigned by Zoning Staff Assistant)

SUBJECT PROPERTY ADDRESS

Map(s) _____ Lot(s) _____ Book(s) & Page(s) _____

PROPERTY OWNER:

Name: _____
Mailing Address: _____
Telephone Number: _____
E-mail Address: _____

PRESENT OWNERSHIP SINCE: _____

******If the Owner or Applicant/Petitioner is a Corporation or LLC, a certificate of good standing must be attached to this application.***

APPLICANT/PETITIONER, IF DIFFERENT FROM OWNER: _____

REPRESENTATIVE(S) FOR APPLICANT/PETITIONER

Relationship to Property Owner (Example – Spouse, Attorney, Engineer) _____
Name: _____
Mailing Address: _____
Telephone Number: _____
E-mail Address: _____

Relationship to Property Owner (Example – Spouse, Attorney, Engineer) _____
Name: _____
Mailing Address: _____
Telephone Number: _____

Describe what is proposed for this property:

Existing Utilities: Town Water & Sewer _____ Private Well & Septic _____ Town Water & Septic _____
Proposed Utilities: Town Water & Sewer _____ Private Well & Septic _____ Town Water & Septic _____

ZONING DETERMINATION

The Board recommends that the Applicant/Petitioner schedule an appointment with the Zoning Enforcement Officer to assist with this portion of the application.

Call the Building Department at (508) 910-1820 for appointment.

Zoning District _____

Is this property located in any overlay district? Yes _____ No _____

If yes, which overlay district? _____

Is this property located in the flood zone? Yes _____ No _____

This application is a request to amend Decision Case # _____

State why an amendment is needed and cite the applicable by-law(s) and/or by-law section(s).

Zoning Enforcement Officer Comment:

Zoning Enforcement Officer's Signature (Recommended): _____

Date: _____

SIGNATURE SHEETS

The Board recommends that you meet with the following offices prior to submitting your application. If a department does not apply to your case, write N/A (not applicable) on the signature line.

PLANNING DEPARTMENT – (508) 910-1816

Meet with the Planning Director:

- For all projects

Comment:

Planning Director’s Signature: _____ **Date:** _____

BOARD OF HEALTH – (508) 910-1804

Meet with the Director of Public Health if:

- You are requesting an expansion or addition to a residential/commercial structure
- The subject property is in the Aquifer District, Flood Zone, or an environmentally sensitive area
- There are septic system or private well concerns
- Your proposal involves food or hazardous waste

Comment:

Director of Public Health’s Signature: _____ **Date:** _____

CONSERVATION – (508) 910-1822

Meet with the Environmental Affairs Coordinator:

- To see if any of their regulations apply
- To file an A-1 site inspection for any type of construction that may occur
- If the subject property has any potential wetland issues
- If the subject property is in the Aquifer District, Flood Zone, or an environmentally sensitive area

Comment:

Environmental Affairs Coordinator Signature: _____ **Date:** _____

SOIL BOARD – (508) 910-1804

Meet with the Soil Board Agent:

- If any type of dredging, digging, or mining is being performed on the parcel in question.

Comment:

Soil Board Agent Signature: _____ **Date:** _____

DEPARTMENT OF PUBLIC WORKS – (508) 999-0740 Ext. 220

All plans involving the construction of roads and/or utilities must be seen by the Department of Public Works prior to submission.

The DPW will require a fee for plans involving road construction, drainage, water or sewer mains and services.

Comment:

Director of Public Works Signature: _____ **Date:** _____

More Contact Information

Select Board’s Office (508) 910-1813

Town Clerk (508) 910-1800

Fire Departments

District 1 – (508) 996-1596

District 2 – (508) 636-2441

District 3 – (508) 994-6761

Safety Officer (508) 910-1754

Zoning Board of Appeals-Principal Clerk Assistant (508-910-1868)