



**Town of Stratham, NH
Subdivision Application**

Map# _____ Lot# _____

Project Name: _____

Location: _____

Project Description: _____

Zone: _____ Total Number of Lots: _____

Applicant:

Name: _____ Phone: _____

Company: _____ Fax: _____

Address: _____

Owner:

Name: _____ Phone: _____

Company: _____ Fax: _____

Address: _____

Agent:

Contact Name: _____ Phone: _____

Company: _____ Fax: _____

Address: _____

By signing this application, you are agreeing to all rules and regulations of the Town of Stratham, and are agreeing to allow agents of the Town of Stratham to conduct inspections, during normal town business hours, of your property, to ensure compliance with all Stratham Zoning and Subdivision regulations while your application is under consideration and during any construction phases after approval is granted.

The Signor shall be the owner or the signor shall provide a notarized letter signed by all the property owners giving the signor permission to represent the owner in presentation of this application.

Signed: _____ **Date:** _____

Fees:

Base Application Fee \$100.00* for the first lot plus \$ 50.00 per additional proposed lot or unit.

Notification Fee: \$ 50.00 plus Abutters Notices X \$5.00 per abutter = \$ _____ .00

*Additional fees may be charged to cover inspection and review cost.

For Office Use Only

Date Application Received: _____ Total Fees Collected with Application: \$ _____

Abutters List Received: _____ Plans & Check List Received: _____

Notice Date: _____ PB Application Acceptance Date: _____ PB Hearing Date: _____

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