



TOWN OF STRATHAM

Incorporated 1716

10 Bunker Hill Avenue, Stratham, NH 03885

Planning Department 603-772-7391, option 4

www.strathamnh.gov

CONDITIONAL USE PERMIT APPLICATION

1. APPLICANT & PROPERTY OWNER INFORMATION:

Applicant Name:			
Phone #:		Email Address:	
Mailing Address:			
Property Owner Name (If different from Applicant):			
Phone #:		Email Address:	
Mailing Address:			
3. PROPERTY INFORMATION:			
Street Address:			Parcel ID(s):
Total parcel area:	<input type="text"/> acres <input type="checkbox"/> SF	Property Deed Information:	Book: <input type="text"/> Page: <input type="text"/>
Existing Use of Property:			

Zoning District(s): Check all that apply.

<input type="checkbox"/> Commercial/Light Industrial/Office	<input type="checkbox"/> Residential/Agricultural
<input type="checkbox"/> Flexible/Mixed Use Development	<input type="checkbox"/> Retirement Planned Community
<input type="checkbox"/> Gateway Commercial Business	<input type="checkbox"/> Route 33 Legacy Highway Heritage
<input type="checkbox"/> Industrial	<input type="checkbox"/> Special Commercial
<input type="checkbox"/> Manufactured Housing/Mobile Home	<input type="checkbox"/> Town Center
<input type="checkbox"/> Professional/Residential	

Overlay District(s): Check all that apply.

<input type="checkbox"/> Aquifer Protection
<input type="checkbox"/> Floodplain Management
<input type="checkbox"/> Shoreland Protection
<input type="checkbox"/> Wetland Conservation

2. PROFESSIONAL SUPPORT: (Include additional sheets if necessary.)

Company Name:			Contact:	
Phone #:		Email Address:		
Mailing Address:				
Company Name:			Contact:	
Phone #:		Email Address:		
Mailing Address:				

4. DESCRIPTION OF PROJECT: (Attach a separate sheet if necessary.)

Describe the proposed use or activity that requires a Conditional Use Permit:

5. CONDITIONAL USE PERMIT INFORMATION:

Check all that apply and attach a separate sheet providing justification for the applicable Conditional Use Permit criteria.

<input type="checkbox"/> Uses Permitted By Conditional Use Permit – ZO §3.6	<input type="checkbox"/> Wetlands Conservation District – ZO §11.5 and/or 11.6
<input type="checkbox"/> Flexible/Mixed Use Development District – ZO §3.7.4	<input type="checkbox"/> Shoreland Protection District – ZO §12.7
<input type="checkbox"/> Gateway Commercial Business District – ZO §3.8.6	<input type="checkbox"/> Sewage Sludge and Residential Septage Application – ZO §14.3.4
<input type="checkbox"/> Town Center District – ZO §3.9.6	<input type="checkbox"/> Telecommunication Facilities – ZO §19.8
<input type="checkbox"/> Solar Energy Systems – ZO §5.13	<input type="checkbox"/> Sanitary Protection & Septic Ordinance – ZO §20.3
<input type="checkbox"/> Signage – ZO §7.3	
<input type="checkbox"/> Residential Open Space Cluster Development – ZO §8.6	

I declare under penalty of perjury that all of the submitted information is true and correct to the best of my knowledge and belief. I have read and agree to abide by the regulations and conditions of approval listed on this application. I understand that my misrepresentations of submitted data may invalidate any approval of this application.

Signature of Applicant

Print Applicant's Name

Date

Signature of Property Owner

Print Property Owner's Name

Date

8. AUTHORIZATION TO ENTER THE SUBJECT PROPERTY:

I hereby authorize members of the Stratham Planning Board, Planning Department, Conservation Commission and other pertinent Town Departments and Boards to enter my property for the purpose of evaluating this application, including performing inspections during the application phase, post-approval phase, construction phase and occupancy phase. It is understood that these individuals must use all reasonable care, courtesy, and diligence when on the property.

Signature of Property Owner

Print Property Owner's Name

Date

INSTRUCTIONS FOR SUBMITTING A COMPLETE APPLICATION (Please read carefully)

For an application to be scheduled on the next available Planning Board agenda, the following items MUST be submitted to the Planning Department by close of business on the officially posted submittal date:

- Nine (9) copies of the completed and signed CUP application form, abutters list, and all supporting documentation.**
The application will not be placed on the Planning Board agenda unless all required signatures are on the application. The property owner MUST sign the application form.
- One (1) full size and nine (9) 11" x 17" prints of the plan set (if applicable).** Owner's signature must be on at least one (1) plan, indicating his/her knowledge of the plan and application.
- Application fee and Notice costs.** All checks are to be made payable to the Town of Stratham.
 1. CUP Application Filing fee - \$100.00 plus notice costs.
 2. Notice Costs - \$50.00 plus \$10.00 per abutter/easement holder/owner/applicant/consultant.
- Two (2) sets of abutter/easement holder/owner/applicant/consultant mailing labels.**

PLEASE DO NOT WRITE BELOW THIS LINE – FOR PLANNING DEPARTMENT USE ONLY

Application Fee: _____

Check Number: _____

Public Notice Fee: _____

Check Amount: _____

Abutter Notice Fee: _____

Check Payor: _____