



TOWN OF  
PETERBOROUGH  
PLANNING BOARD

DO NOT WRITE IN THIS SPACE

File Number: \_\_\_\_\_

Date App. Rec'd \_\_\_\_\_

Amount Rec'd \_\_\_\_\_

Clerk: \_\_\_\_\_

**CONDITIONAL  
USE/SPECIAL  
PERMIT  
APPLICATION**

**Office of Community Development**

**1 Grove Street**

**Peterborough, NH 03458**

**Office: (603) 924-8000 ext. 104**

**Fax: (603) 924-8001**

**Email: [ocd@townofpeterborough.us](mailto:ocd@townofpeterborough.us)**

**Web Site: [www.townofpeterborough.com](http://www.townofpeterborough.com)**

**APPLICATION PROCEDURE**

1. Conditional Use or Special Permits are required for the following uses:
  - a. Modification of Performance Standards spelled out in §245-10, §245-10.1, and §245-10.2.
  - b. Streets, roads, access ways, driveways, and utility rights-of-way or easements within the Wetland Protection Overlay Zone.
  - c. Construction of accessory structures associated with and/or additions to legally pre-existing multi-family or non-residential primary structures within the Wetland Protection Overlay Zone.
  - d. Bulk Fuel Storage.
  - e. Telecommunication Facilities.
2. The checklist that is included here applies only to #'s 1 (b) and (c) above. Please see Article IX of the Site Plan Review Regulations for additional information on applications for these uses.
3. Applications for #'s 1 (a), (d), or (e) may be filed concurrently with the site plan.
4. The Planning Board holds public hearings on the second Monday of each month. The filing deadline for these meetings is generally the third Tuesday of the prior month; please see the posted schedule for each month's filing deadline.

**APPLICATION FEE**

1. If the proposal for which a Conditional Use Permit is required is subject to another Land Use Board approval, there is no separate fee for the Conditional Use Permit.
  2. Basic application filing fee----- = \$ 75
  3. Abutter notification at \$4.00 per notification. ----- \$4.00 x      Abutters = \$
  4. Notification of licensed professionals whose professional seal appears on any of the submittal documentation. ----- \$4.00 x      Professionals = \$
- Total Application Fee = \$

I, the applicant or owner's duly authorized agent, do hereby submit this plan for review as required by the Town of Peterborough, New Hampshire. I agree to be fully responsible for payment of all fees, costs, and expenses incurred with respect to this application. I understand that if I am not the owner of the property named above, this application must be signed by the owner(s) of the property showing recognition and approval of the application and approval for the applicant/duly authorized agent to represent the owner(s) in this subdivision application. I further grant the Planning Board, Office of Community Development Staff, and authorized agents the right to enter the premises at reasonable times for the purpose of gathering additional information during the review process and inspections of the project during the construction phase.

Applicant/Agent: _____	Owner: _____
Signature: _____	Signature: _____
Date: _____	Date: _____

**If the application is not signed or has been changed in any manner, it will not be processed.**

PLEASE INDICATE THE PROPOSED USE (CHECK AS MANY AS APPLY):

- Modification of Performance Standards       Streets and other Access Ways in the WPOD  
 Accessory structures or additions to multi-family or non-residential primary buildings in the WPOD  
 Bulk Fuel Storage       Telecommunications Facilities

Name of Applicant or Owner's Agent: \_\_\_\_\_

Address of Applicant or Owner's Agent: \_\_\_\_\_

Phone Number of Applicant or Owner's Agent: \_\_\_\_\_

Name of Owner(s) of Property: \_\_\_\_\_

Address of Owner(s): \_\_\_\_\_

Phone Number of Owner(s): \_\_\_\_\_

Address of Proposed Subdivision: \_\_\_\_\_

Parcel Identification Number: \_\_\_\_\_

Name of Preparer, if other than Applicant: \_\_\_\_\_

Contact Information for Preparer: \_\_\_\_\_

Proposed Number of Lots (if applicable): \_\_\_\_\_

Proposed Use (Please Be Specific): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Zoning District  
(Check All That Apply)**

- |                     |       |                                 |       |
|---------------------|-------|---------------------------------|-------|
| Family              | _____ | Village Commercial              | _____ |
| General Residence   | _____ | West Peterborough               | _____ |
| Rural               | _____ | Commerce Park                   | _____ |
| Downtown Commercial | _____ | Retirement Community            | _____ |
| Commercial          | _____ | Office                          | _____ |
| Business/Industrial | _____ | Monadnock Community Health Care | _____ |

**APPLICATION CHECKLIST FOR USES IN THE WETLANDS PROTECTION  
OVERLAY ZONE**

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NOTE: This checklist is for purposes of administrative efficiency. It does not preclude the Board from requesting additional information if deemed necessary for making an informed decision.

Required			Submitted		Waived
YES	NO		YES	NO	
		A site plan, with four (4) copies, prepared by a person qualified to assess the functions and values of wetlands and should contain, at a minimum, the following:			
		1. Name, address, signature, license number and seal of the professional who prepared the plan.			
		2. North arrow and date.			
		3. The wetland limits and associated buffer.			
		4. Locus map with adjacent wetlands and other significant hydrological features.			
		5. Soil and vegetation types.			
		6. Topographic contours at no greater than 5-foot intervals.			
		7. Surface drainage patterns, intermittent and year-round.			
		8. Existing and proposed development, removal of vegetation, and alteration of the land surface.			
		9. Location of building envelope.			
		10. Computation of the area to be impacted, in square feet of surface area and cubic yards of cut and fill.			
		<b>Other:</b>			
		A report that documents compliance with the Performance Standards contained in Article IX of the Site Plan Review Regulations, Section 233-52, as applicable.			