

REQUEST FOR A PLANNING BOARD WORK SESSION

**REQUIREMENTS: 1 ORIGINAL COPY OF THIS FORM AND ALL
OTHER INFORMATION OF SUPPORT**

DATE: 9/3/19

NAME OF APPLICANT: Neil Intenstein

ADDRESS: 320 Bull Mill Rd.
Chester, N.H. 10918

PHONE NUMBER: 845-325-5050 EMAIL neilptny@hotmail.com

PROJECT LOCATION: 320 Bull Mill Rd

SECTION 5 BLOCK 1 LOT 90

CONSULTANT NAME: _____

ADDRESS: _____

PHONE #: _____ EMAIL _____

DESCRIBE THE PROJECT: Adding R/L to grade

SIGNED: [Signature] DATED: 9/3/19

**PLEASE ATTACH ANY PLANS, PICTURES AND DIAGRAMS WITH
DIMENSIONS ETC. THAT ARE APPLICABLE TO YOUR CASE.**

SEE FEES

*** THIS NON REFUNDABLE FEE WILL BE APPLIED TOWARD YOUR
APPLICATION FEE IF MOVING FORWARD.**

PLEASE CALL 845-469-7000, EXT. 308 WITH ANY QUESTIONS.