

**APPLICATION for MODIFICATION TO AN
APPROVED SPECIAL PERMIT**

**APPLICANT/
CONTACT:** Name: _____
Address: _____
Phone Number: _____
E-mail: _____

OWNER: Name: _____
Address: _____
Phone Number: _____

*** If applicant is different than owner(s), a letter of authorization from the owner must accompany this form.**

PROJECT LOCATION: Street Address: _____
Assessors' Map: _____ Lot(s): _____
Registry of Deeds Book: _____ Page: _____
Zoning District(s): _____ Lot Size: _____

DATE OF PREVIOUSLY APPROVED SPECIAL PERMIT: _____

Applicable Section of Zoning Bylaw: _____

Proposed Use: _____

PERMITS/APPROVALS:

Attach any previous or pending decision documentation regarding the site plan to (*such as special permit, variance, finding, etc.*) received from the Planning Board, Zoning Board of Appeals, Conservation Commission, Preservation Commission, and/or Historic District Commission.

SUBMITTAL REQUIREMENTS:

- ___ Application fee made payable by check to the Town of Danvers. (\$100.00)
- ___ Completed application and all supporting documentation. (*any previous Board or Commission decisions*)
- ___ Letter providing owner(s) authorization. (*if the owner is not the applicant*)
- ___ Project narrative describing the proposed modification(s) and listing all requested waivers.
- ___ Electronic PDF format of all plans, elevations, and applicable reports/studies.
(*Can be submitted on CD or emailed to kday@mail.danvers-ma.org.*)

Signature of Applicant/Agent: _____ **Date:** _____

For Department Use Only:
Date Comments Due _____
Date of Planning Board Hearing: _____

***Must be submitted 30 days prior to
Planning Board hearing.
* Incomplete filings will not be accepted.**