



City of Dover, New Hampshire
APPLICATION FOR EXTENSION OF/ AMENDMENT TO
OR WAIVER FOR PLAN/ DRIVEWAY

[Revised August 20, 2020]

<i>Office Use Only</i>	Amount Paid: _____	Date/Time Received: _____
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APPLICANT INFORMATION

Name of Applicant: _____ Telephone # _____
Address of Applicant: _____ E-Mail _____
Project Name: _____ Project Location: _____
Planning File Number: _____ Date of Original Approval _____
File Type: Conditional Use _____ Site Plan Review _____ Subdivision _____

EXTENSION INFORMATION (Note: notification of abutters required for first time extensions under Sec. 153-9.B and Sec. 157-23.B only)

Extension type requested (*check one*): ___Sec. 153-8.A ___Sec. 153-9.B ___Sec. 157-13.A ___Sec. 157-23.B
Current deadline date: _____ Number of Extensions Previously granted by Board _____
Reason(s) for extension/comments (*attach additional sheets as needed*): _____

AMENDMENT INFORMATION

Condition(s) or portion of plan to be amended: _____
Reason(s) for amendment/comments (*attach additional sheets as needed*): _____

WAIVER INFORMATION

Site Review/Subdivision Regulations section(s) to be waived: _____
Justification for waiver request(s) (*attach additional sheets as needed*): _____

SIGNATURES

I/We hereby submit this application to the Planning Board and attest that to the best of my knowledge all of the information on this application form and in the accompanying application materials and documentation is true and accurate. As applicant or as agent, I attest that I am duly authorized to act in this capacity.

Signature of Property Owner: _____ Date: _____
Signature of Applicant (*if different from owner*): _____ Date: _____
Signature of Agent: _____ Date: _____

**APPLICATION FOR EXTENSION OF/ AMENDMENT TO OR
WAIVER FOR PLAN/ DRIVEWAY
LIST OF ABUTTERS**

Pursuant to RSA 676:4, the State Law of New Hampshire, the City of Dover is required to notify the applicant, abutters (including holders of conservation easements), and any professional whose seal is on the plan, of the public hearing by certified mail, return receipt requested. Staff will provide the abutter information, while the applicant must provide accurate contact information for the owner, applicant and professional agents representing the project.

Owner:

TAX MAP	LOT #	PROPERTY OWNER	MAILING ADDRESS

Applicant (if different from owner):

APPLICANT NAME	APPLICANT COMPANY	MAILING ADDRESS

Surveyor and/or Engineer/Professional Agent:

NAME	COMPANY	MAILING ADDRESS

Conservation Easement Holder:

TAX MAP	LOT #	NAME OF EASEMENT HOLDER	MAILING ADDRESS

PLANNING BOARD FEE SCHEDULE/INVOICE

(Revised July 1, 2021)

Below are the fees associated with plan review and are subject to a nonrefundable application fee to cover administrative expenses. Please complete the information below and provide payment with your application submittal. **Plan Review Fees shall be paid prior to technical review committee (TRC) being scheduled.** For plans not requiring TRC review, **fees are due 21 days prior** to the Planning Board meeting. Staff will coordinate abutter/notice fees, which will be invoiced and must be paid 28 hours before the Planning Board meeting for an application to be heard. Fees shall be paid by cash or check made payable to "City of Dover".

A. Plan Review Fees

1. Application fee for the following (SELECT ALL THAT APPLY):

- SUBDIVISION Application fee \$200.00 + \$150.00 x # _____ new lots created = \$ _____
- LOT LINE ADJUSTMENT Application fee \$200.00 + \$100.00 X # ___ of lots involved = \$ _____
- TRANSFER OF DEVELOPMENT RIGHTS Application fee \$200.00 = \$ _____
- SITE REVIEW – RESIDENTIAL Application fee \$200.00+ \$100.00 x # ___ per dwelling unit =\$ _____
- SITE REVIEW – NON-RESIDENTIAL Application fee \$200.00 + (not to exceed \$10,000)
 - New construction \$.15 sq. ft. x # _____ sq. ft.= \$ _____
 - Additions (new floor space) \$.10 per sq. ft. x # _____sq. ft.= \$ _____
- MOTEL/HOTEL \$35.00 x # ___ per lodging unit= \$ _____
- CHANGE OF USE Application fee \$200.00 + (not to exceed \$5,000)
 - Existing floor spaces \$.10 per sq. ft. x # _____ sq. ft. = \$ _____
- CONDITIONAL USE PERMIT Application fee \$200.00 x # _____ per Application = \$ _____
- GRAVEL PIT/ EXCAVATIONS
 - Application fee \$50.00= \$ _____
 - Permit fee \$75.00= \$ _____
- EXTENSIONS/AMENDMENTS/WAIVERS FOR AN APPROVED PLAN Application fee \$200.00 = \$ _____
- REQUEST FOR REZONING Application fee \$200.00 = \$ _____
- DRIVEWAY WAIVER Application fee \$200.00 = \$ _____

- 2. TOTAL IMPERVIOUS PAVED AREA** (for new development, roadways or additions to existing parking lots, (not to exceed \$10,000)) Application fee of \$200.00 is N/A if it is part of a Site Review or Subdivision Plan. \$200.00 + \$.07 per sq. ft. x # _____ sq. ft. = \$ _____

SUBTOTAL PLAN REVIEW FEE (A) = \$ _____

AND

B. Abutter Notification/Mailing Labels - this office will create and print the abutter list and provide labels in triplicate for each abutter. The applicant/owner will review the list for accuracy and provide to us the engineer, architect, licensed land surveyor (LLS), licensed landscape architect (LLA) and/or soil scientist whose professional seal appears on the plan with names and addresses for notices.

- Applicant & Owner, engineer, architect, LLS, LLA and/or soil scientist
 - Certified letters fee # _____ of x \$8.00= \$ _____
- Certified letters fee: # of abutters _____ X \$8.00= \$ _____
- First Class Mail fee (for individual owner of units within a condominium or other collective form of ownership): # of abutters _____ X \$1.00= \$ _____
- Creating/Printing Abutter Labels in triplicate per sheet _____ x \$10.00= \$ _____

C. Foster's newspaper public notice fee \$100.00 x # _____ applications = \$ _____

SUBTOTAL NOTICE FEE (B & C) = \$ _____

TOTAL INVOICE AMOUNT (A, B & C) = \$ _____

PLAN REVIEW FEE COLLECTED/PAID = \$ _____

BALANCE DUE = \$ _____

The balance due must be paid 28 hours prior to the Planning Board Meeting, to be heard.