

FORM A

APPLICATION FOR ENDORSEMENT OF PLAN

BELIEVED NOT TO REQUIRE APPROVAL

The undersigned wishes to record the accompanying plan and requests a determination and endorsement by said Board that approval by it under the Subdivision Control Law is not required.

1. Name of Applicant(s): CHRISTOPHER SLADE
Contact Address: 62 S. BOLTON RD, BOLTON, MA 01740
Phone: 978-265 6415 Email Address: CSLADE73@COMCAST.NET
2. Name of Property Owner(s): SAME
Contact Address: "
Phone: " Email Address: "
3. Name of Registered Land Surveyor: DAVID TEACHOUT PLS/W/ J.D. ASSOLV
Address: 7 CEDER ST LINTON, MA. 01570
Phone: _____ Email Address: _____
4. Deed of property recorded in: Book No. 50871
17730
17579 Page, 211
238
382
of the Worce Registry of Deeds
5. Property Location: 89 + 91 S. BOLTON RD
6. Assessor's Map and Parcel: 3C 18, 20.1, 27
7. Zoning District(s): RES.
8. Property Acreage: ~ 11 AC
9. Number of Existing Lots: 2 (4) 200'/1.9 (5) 50'/4.72
10. Proposed Lot(s) Frontage & Acreage: (1) 200'/2.38 (2) 200'/2.16 (3) 200'/1.94
11. List any Board of Appeals decisions pertaining to this site: NONE
NONE
12. Reason plan does not constitute a subdivision: NO NEW FRONTAGE CREATED

Signature of Applicant: Michael S. Stade Date: 1/16/2022

Signature of Owner: SAKE Date: _____