

**TOWN OF MIDDLEFIELD PLANNING BOARD**  
**FORM B: Application for Approval of a Preliminary Subdivision Plan**

DATE \_\_\_\_\_

**NOTE:** File a complete application form with the Board of Health, Conservation Commission, Board of Selectman, and Road Superintendent, and fee (with application fee, see Section 9 of Middlefield Subdivision Rules and Regulations), plus six (6) prints of the plans with the Planning Board. Include with the application all other necessary and supporting information and documentation. This procedure is according to Section 4.4 of the Code of the Town of Middlefield (Subdivision Regulations) and according to M.G.L. Chapter 41§ 81S.

To the Planning Board:

The undersigned submits the accompanying Preliminary Plan of property located in the Town of Middlefield for approval as allowed under the Subdivision Control Law, M.G.L. Chapter 41§ 81 and the Rules and Regulations governing the Subdivision of Land in Middlefield, Massachusetts.

**1. Application Information**

**Address of Property Location:** \_\_\_\_\_

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Status of Applicant: Owner \_\_\_\_\_ Lessee \_\_\_\_\_ Contract Purchaser \_\_\_\_\_ Other \_\_\_\_\_

Owner (if different from applicant): \_\_\_\_\_

Address: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**Owner's Agent:** \_\_\_\_\_

Address: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_

**Engineer or Surveyor:** \_\_\_\_\_

Address: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**2. Property Information**

Address: \_\_\_\_\_

Assessor Identification: Map #, \_\_\_\_\_ Parcel # \_\_\_\_\_

Recorded in the Hampden Registry of Deeds: Book \_\_\_\_\_ Page \_\_\_\_\_

**3. General Description of Plan:**

- (a) Plan Title \_\_\_\_\_
- (b) Location of Property \_\_\_\_\_
- (c) Total Acreage of Tract \_\_\_\_\_
- (d) Number of lots allowed by zoning \_\_\_\_\_
- (e) Minimum area of proposed lot or lots \_\_\_\_\_

\_\_\_\_\_  
**Signature of Owner**

\_\_\_\_\_  
**Signature of Applicant**

**FOR PLANNING BOARD USE ONLY**

1. Application, six (6) prints, filing fee, supporting documentation, received \_\_\_\_\_(Date)
2. Acknowledgment of receipt by Town Clerk \_\_\_\_\_(Date)
3. Reviews made by Town officers or consultants: (comments attached)  
Board of Health \_\_\_\_\_(Date)  
Highway Department \_\_\_\_\_(Date)  
Fire Department \_\_\_\_\_(Date)  
Conservation Commission \_\_\_\_\_(Date)  
Engineering Consultant \_\_\_\_\_(Date)  
Other \_\_\_\_\_(Date)  
Other \_\_\_\_\_(Date)
4. Planning Board action (see meeting minutes) \_\_\_\_\_(Date)  
Approved \_\_\_\_\_ Modified and approved \_\_\_\_\_ Disapproved \_\_\_\_\_
5. Reproducible returned to applicant \_\_\_\_\_(Date)