

APPLICATION FOR ACTIVE ADULT CLUSTER DEVELOPMENT (AACD)

(Section 213-26.3 Zoning Ordinance)

(Not complete unless accompanied by:

- Required fee (\$200 + \$20/unit/lot + State app. fee \$60)
- Required A-2 Survey and maps
- Statement why the AACD is in the public interest and be consistent with standards and criteria of the ordinance).

Please check Zoning Regulations Section 213-26.3 for complete list of application requirements.

NAME OF DEVELOPMENT: _____ **Section:** _____

Location:

Street Address: _____

Assessor Block & Lot Number _____

APPLICANT:

Name: _____

Address: _____

Telephone: _____

Signature: _____

PROPERTY OWNER: (If different from applicant)

Name: _____

Deed Covenant: Yes _____ No _____

Address: _____

If Yes: Book Vol. _____ Page _____

Signature: _____

Private Easement: Yes _____ No _____

If Yes: Book Vol. _____ Page _____

APPLICATION/SITE DATA:

Zone: _____

Is Property located within 500' of adjoining municipality? Yes _____ No _____

If Yes: What municipality _____

Acreage of entire AACD site: _____

No. of lots/units in overall development: _____

Acreage of this Section: _____

No. of lots/units in this section _____

Lot Coverage: (lot area covered by buildings, structures and parking area as a percentage of the entire site) _____.

PLANNING DATA:

Environmental Information:

Trees over 4" diameter

Tree Survey

Stream or Drainage Course

| Existing | | Proposed | |
|----------|-------|----------|-------|
| Yes | No | Yes | No |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

| | Existing | | Proposed | |
|--|----------|-------|----------|-------|
| | Yes | No | Yes | No |
| Drainage basin survey | _____ | _____ | _____ | _____ |
| Wet Retention Area | _____ | _____ | _____ | _____ |
| Sedimentation Basins | _____ | _____ | _____ | _____ |
| Depth of Mean Water Table | _____ | _____ | _____ | _____ |
| Soil Classifications (Type _____) | _____ | _____ | _____ | _____ |
| 100-yr. flood plain on site (Acreage?) | ____() | _____ | ____() | _____ |
| Lowest Elevation or Lowest Floor | _____ | _____ | _____ | _____ |
| Designated wetland on site (Acreage?) | ____() | _____ | ____() | _____ |
| Field verified by soils scientist | _____ | _____ | _____ | _____ |
| Inland Wetlands Commission Approval | _____ | _____ | _____ | _____ |
| Steep slopes – 18% or greater (Acreage?) | ____() | _____ | ____() | _____ |

Describe natural/historical features to be preserved _____

Describe passive/active recreation amenities to be provided: _____

| Utility Information | Existing | | Proposed | |
|--|----------|--------------|----------|-------|
| | Yes | No | Yes | No |
| Public Water | _____ | _____ | _____ | _____ |
| Size of nearest main | _____ | _____ inches | _____ | _____ |
| Distance from nearest main | _____ | _____ feet | _____ | _____ |
| Public Sanitary Sewers | _____ | _____ | _____ | _____ |
| Size of nearest trunk | _____ | _____ inches | _____ | _____ |
| Distance from nearest trunk | _____ | _____ feet | _____ | _____ |
| Private Septic Tanks | _____ | _____ | _____ | _____ |
| Soil Classifications | _____ | _____ | _____ | _____ |
| (copy of seepage test report to be filed with app.) | _____ | _____ | _____ | _____ |
| Public Storm Water Sewers | _____ | _____ | _____ | _____ |
| Size of nearest pipe | _____ | _____ inches | _____ | _____ |
| Name of Watercourse | _____ | _____ | _____ | _____ |
| (copy of drainage survey and pipe sizing calculations to be filed with application) | _____ | _____ | _____ | _____ |
| Public Utility Easements | _____ | _____ | _____ | _____ |
| Street Lights | _____ | _____ | _____ | _____ |
| Sidewalks (required) | _____ | _____ | _____ | _____ |
| Street signs | _____ | _____ | _____ | _____ |
| Shade trees | _____ | _____ | _____ | _____ |
| Fire Hydrants | _____ | _____ | _____ | _____ |
| (copy of pressure test report on adjacent hydrants within 1,000 feet of the site to be filed with application) | _____ | _____ | _____ | _____ |

SITE DESIGNER _____
 Profession _____ Lic. No. _____
 Address _____
 Telephone/Fax: _____

SURVEYOR _____ Lic. No. _____
Address _____
Telephone/Fax: _____

ENGINEER _____ Lic. No. _____
Address _____
Telephone/Fax: _____

Correspondence should be directed to:

Name: _____
Address: _____

Telephone/Fax _____