

City of Dover, New Hampshire TRANSFER OF DEVELOPMENT RIGHTS APPLICATION

[Revision Date: September 26, 2024]

Office Use Only		Date Received: Time Received:			
APPLICANT AND	OWNER INFORMATION				
Name of Applicant	:	Telephone #			
Address of Applica	nt:				
E-Mail Address:					
		pplicant): Telephone #			
Address of Property Owner:					
·					
PROPERTY INFO	RMATION				
Assessor's Map # _	Lot(s) #				
Address of Propert	y:				
Zoning District(s) _		Overlay District(s)			
Existing Use of Pro	pperty:				
New impervious ar	rea (in s.f.):				
TRANSFER OF DEVELOPMENT RIGHTS INFORMATION					
Type of TRANSFER OF DEVELOPMENT RIGHT REQUEST (Check All That Apply):					
□ Residential [☐ Residential (reduced size)) □ Industrial □ Purchase □ Land Preservation			
Relief sought (C	heck All That Apply):				
☐ Lot Size ☐ F	Frontage Setback	☐ Increase by units			
Describe Proposed	Use or Activity that require	s TDR; describe any impacts and document mitigation:			

List Any Associated State or Federal Permits That H Status:	• •	
Name of Professional That Prepared TDR Plans:		
Address	Telephone #:	
Professional License #:	E-mail address:	
SIGNATURES		
I/We hereby submit this application to the City of D my knowledge all of the information on this applica materials and documentation is true and accurate. authorized to act in this capacity.	tion form and in the accompanying application	
Signature of Property Owner:	Date:	
Signature of Applicant (if different from owner): _	Date:	
Signature of Agent:	Date:	
AUTHORIZATION TO ENTER SUBJECT PROPE I, and my successors, hereby authorize members of and other pertinent City Departments and boards to	f the Dover Planning Board, Planning Department	
this application, including performing inspections do construction phase and occupancy phase. It is und reasonable care, courtesy, and diligence when on t	lerstood that these individuals must use all	
Signature of Property Owner:	Date:	

CITY OF DOVER TRANSFER OF DEVELOPMENT RIGHTS 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.

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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			