



Town of Gilmanton, New Hampshire
Planning Board
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Gary Anderson, Vice-chair
Mark Warren, Select Rep.
Michael Wilson, Select Rep Alt.
Brett Currier, Member
Shane Bruneau, Member
Roy Buttrick, Member
Nicolas Peterson, Member
Dustin Milliken, Alt. Member

Preliminary Discussion Request

Pursuant to RSA 676:4, II. A planning board may provide for preliminary review of applications and plats by specific regulations subject to the following:

(a) Preliminary conceptual consultation phase. The regulations shall define the limits of preliminary conceptual consultation which shall be directed at review of the basic concept of the proposal and suggestions which might be of assistance in resolving problems with meeting requirements during final consideration. Such consultation shall not bind either the applicant or the board and statements made by planning board members shall not be the basis for disqualifying said members or invalidating any action taken. The board and the applicant may discuss proposals in conceptual form only and in general terms such as desirability of types of development and proposals under the master plan. Such discussion may occur without the necessity of giving formal public notice as required under subparagraph I(d), but such discussions may occur only at formal meetings of the board.

DATE RECEIVED: _____

APPLICATION MUST BE ORIGINAL, MUST BE TYPED OR PRINTED LEGIBLY IN PEN. M/L: _____

Property Owner(s) of Record: _____

All Owner(s) of Record Must Be Listed and are REQUIRED to Sign the Application

Property Address: _____ **Class of Road** _____

Mailing Address: _____, _____, _____, _____
If Different than the subject property Street or PO Box City/Town State Zip code

Home # _____ **Cell #** _____ **E-mail** _____

Applicant(s): _____
(If Different than Property Owner)

Mailing Address: _____, _____, _____, _____
If Different than the property Owner(s) Street or PO Box City/Town State Zip Code

Home # _____ **Cell #** _____ **E-mail** _____

Land Agent: _____
(If Applicable)

Mailing Address: _____, _____, _____, _____
Street or PO Box City/Town State Zip Code

Business # _____ **Cell #** _____ **E-mail** _____

Please describe in detail ALL existing uses on the subject property. Include primary use and all accessory uses: _____

Please describe in detail the proposed subdivision including the number of lots proposed and the size of each: _____

Zoning District: _____ **Total Acreage:** _____

By signing this form, you hereby acknowledge RSA 676:4, II; as stated above.

Signature of Applicant

Planning Staff

Printed Name of Applicant

Date