



**Town of Gilmanton, New Hampshire
Planning Board
Academy Building
503 Province Road
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Gilmanton, New Hampshire 03237

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**C. Roy Buttrick, Chair
Vincenzo Sisti, Vice-chair
Mark Warren, Select Rep.
Brett Currier, Member
Jake Dalzell, Member
Marty Martindale, Member
Parker, Hoffacker, Member
Bre Daigneault, Planning Admin
Mark Fougere, Certif. Planner**

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: Bear Investments LLC

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

Property Address: 13E NH Rt 106

Class of Road 1

Mailing Address: 320 Brook Rd.

Sanbornton

NH

03269

If Different than the subject property

Street or PO Box

City/Town

State

Zip code

Home #

Cell # 603-520-2495

E-mail

Gary.Anderson@912@gmail.com

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: Plot Plan w/ wetland delineation

Zoning District: Business

Total Acreage: 4.5

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

Signature of Applicant

Gary Anderson

Printed Name of Applicant

Planning Staff

8/26/21

Date