## FORM LID-1

## APPLICATION FOR LOW IMPACT DEVELOPMENT

Two (2) copies of this form, filled out and signed, should be included with the original and seven (7) copies of the plan in question. (Please type or print information in blanks below)

	Westminster, Massac	chusetts, 20*
		(Date of Filing)
Name of Applicant:	]	Phone #
Address:		
E-Mail Address:		
Name of Owner:		Phone #
Address:		
E-Mail Address:		
Name of Surveyor/Engineer: Address:		Phone #
Book No.	Page No	
Map: Lot Number:	Area:	
Zoning District:		
Provide area (acres) for the follow Project Site:		
Proposed Site Disturbance:		
		% Open space:
Impervious Coverage:		
Existing: Proposed:		-
	formation required by the Low Impact Dev	-
written evidence shall be submitted authority to submit such application with the application a list of its off	the owner of the property or if the applica d with the application accompanying the pl n for each owner involved. If the applican icers, and a duly authenticated certificate of d to represent the corporation in all further	an that the agent has the t is a corporation, it shall submit f vote authorizing said officers
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