

Office Use Only

Case #: _____

Date Received: _____

Time Received: _____



**RYE CONSERVATION COMMISSION
10 CENTRAL ROAD
RYE, NH 03870**

Application for Conservation Commission Hearing

Applicant/Owner Information:

Name of Applicant: _____

Telephone Number: _____

E-mail: _____

Mailing Address: _____

Name of Owner (if different from applicant): _____

Telephone Number: _____

E-mail: _____

Mailing Address: _____

Property Information:

Address: _____ Map: _____ Lot: _____

Zoning District: _____ Overlays: _____

Type of Wetland: _____ Buffer Distance: _____

Project Information:

Description of Project:

Variances Requested:

Do you have a recent survey? Yes / No Date: _____

Name of Surveyor: _____

Telephone Number: _____

E-mail: _____

Mailing Address: _____

Have the wetlands been delineated? Yes / No Date: _____

Name of Wetland Scientist: _____

Telephone Number: _____

E-mail: _____

Mailing Address: _____

Name of Contractor: _____

Telephone Number: _____

E-mail: _____

Mailing Address: _____

Checklist:

- ☐ 1) 2 Hard Copies of Plans
- ☐ 2) 1 Electronic Copy of Plans
- ☐ 3) New Hampshire Coastal Viewer Map
- ☐ 4) Town of Rye Wetlands/Water Resource Maps