

TOWN OF DURHAM

8 NEWMARKET RD DURHAM, NH 03824-2898 603/868-8064 www.ci.durham.nh.us

APPLICATION FOR CONDITIONAL USE PERMIT

This form and all required information per Durham's Zoning Ordinance (Article VII, Section 175-23(C) attached) must be filed at least 20 days before the meeting of the Planning Board with the Planning Staff in person or by mail.

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Property Location:	CT	
Street Address 277 Main St. Tax Map # 9 Lot # 8-2 Zone Orli		
Tax Map # 9 Lot # 8-2 Zone Orli		
Owner(s):		
Name Malph Yavone	277 Main LLC	
Mailing Address 12 Marge	2 71.	
Lahe Gra	WE NY. 11775	
Daytime Phone 671-834-9	277 Main LLC 2 Pl. ove NY. 11775 1434 Fax 631-585-7945	
If another person or firm will represent this application to the Town, please complete the following (letter		
of authorization should be included):		
Name		
Daytime Phone	Fax	
Abutters:		
Attach a senarate sheet listing by Man &	& Lot number, each owner's name, and mailing address of all	
abutters within 300 feet of the property.	. The list of abutters must include any holders of conservation,	
preservation, or agricultural preservatio	on restrictions in accordance with RSA 676:4(I)(d).	
Name & Address of Licensed Profess	rionals (as annlicable)	
Engineer MA.	ionais (as applicable).	
Land Surveyor NA.	ects LLC	
Architect Cincoln Mychit	ecry LLC	
Soil Scientist NA.		
Proposed Use: Create a 4 bed	room apt by combining two 2 bedroom apartments	
Please prepare and	l attach a written description of the proposal.	
	h should not exceed three pages.	
I certify that all information provided is	s, to the best of my knowledge true:	
Owner's Signature: 150078 Pour	Oul Date 6-2-15	
-11-7		