



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

RECEIVED
 Town of Durham
FEB - 1 2017
 Planning, Assessing
 and Zoning

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.

Property Location:

Street Address 15 MAIN STREET
 Tax Map # 5 Lot # 2 Zone 2

Owner(s):

Name PETER MURPHY
 Mailing Address 6 PARK ST
NEWBURY PORT MA. 01950
 Daytime Phone 617-312-4112 Fax _____

If another person or firm will represent this application to the Town, please complete the following (letter of authorization should be included):

Name _____
 Mailing Address _____
 Daytime Phone _____ Fax _____

Abutters:

Attach a separate sheet listing by Map & 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 preservation restrictions in accordance with RSA 676:4(I)(d).

Name & Address of Licensed Professionals (as applicable):

Engineer _____
 Land Surveyor _____
 Architect NICK ISAAC
 Soil Scientist _____

Proposed Use: ADD SHED DOORMAT TO REAR SECTION OF ROOF

**Please prepare and attach a written description of the proposal.
 Length should not exceed three pages.**

I certify that all information provided is, to the best of my knowledge true:

Owner's Signature: Peter Murphy **Date** 2/1/2017