

TOWN OF BOURNE Planning Board



CONDITIONAL USE PERMIT UNDER ZONING BYLAW

(PLEASE PRINT OR TYPE THIS FORM)

To	Bourne Planning Board Bourne, MA 02532	Fee: \$50 Date:
1.	Name of Applicant:	Phone:
	Mailing Address:	
2.	Owner (if different):	Phone:
3.	The premises affected is at (address):	
	ZONING DISTRICT: MAP	PARCEL: LOT:
4.	Conditional Use Permit as authorized by Section	on 2826 of the Bourne Zoning Bylaw.
5.	Describe specifically the nature of your request:	
6.	Signature of Applicant or	
	Authorized Representative:	Date:
	Required submittals: Plot Plan	