

TOWN OF OXFORD

SITE PLAN REVIEW APPLICATION CHECKLIST

This Site Plan Review Checklist should be completed by the applicant. It is intended to assist the applicant in the planning process of preparing a site plan review application for Planning Board Action. The type of the proposed project will determine the types of information required to review a site plan, therefore, a pre-application meeting with the department heads to determine the list of items that must be completed is strongly encouraged. The applicant is also advised to go through the Site Plan Review Regulations for full details.

Project Information	Project Title: _____ Property Location: _____ Tax Map: _____ Lot: _____ Zoning _____ Owner: _____ Name & Address of Engineering Firm: _____ Date of Pre-Application Meeting _____ Date of Submission: _____ Applicant: _____ Applicant Phone# _____ Applicant Address _____ Town _____ State _____ Zip _____
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Engineering Firm Affidavit	I, _____ a Massachusetts licensed <input type="checkbox"/> architect, <input type="checkbox"/> engineer, <input type="checkbox"/> landscape architect hereby certify that I have prepared the documents submitted by _____ for the development of land at _____ and that I have reviewed the requirements for submission and have completed the following checklist:
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General	<input type="checkbox"/> Maximum sheet size shall be 24" x 36" unless otherwise approved prior to submission <input type="checkbox"/> Set shall be comprised of separate sheets as listed below unless otherwise approved at the pre-application meeting. <input type="checkbox"/> All plans shall be stamped by Commonwealth of Massachusetts-registered Professional Engineer, Professional Land Surveyor, and/or Professional Landscape Architect <input type="checkbox"/> All plans shall be shown at 1" = 40' or less and shall show a graphical scale <input type="checkbox"/> All plans shall show an appropriate Legend All plans shall have a title block comprised of the following: <input type="checkbox"/> Project Title <input type="checkbox"/> Sheet Title <input type="checkbox"/> Sheet Number <input type="checkbox"/> Registrant Stamp (PE, PLS, LA) <input type="checkbox"/> Engineers name, address <input type="checkbox"/> Scale <input type="checkbox"/> Plan Issue Date <input type="checkbox"/> Plan Revision Date(s) <input type="checkbox"/> Traffic Impact and Access Study (TIAS) to be submitted with application <input type="checkbox"/> Storm Water Management Report to be submitted with application
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Cover Sheet	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">ITEM:</th> <th style="text-align: center;">Yes</th> <th style="text-align: center;">No</th> <th style="text-align: center;">NA</th> </tr> </thead> <tbody> <tr> <td>TITLE BLOCK</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Project name / title</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Street number</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Assessor's map and parcel</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Name and address of Owner</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Name and address of Engineer</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Name and address of Applicant</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Revision Date Block</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table> <p>Locus Map (Show all roads and available building information within 1000 feet) <input type="checkbox"/></p> <p>Planning Board signature block <input type="checkbox"/></p> <p>Plan Index with latest revision date of each plan <input type="checkbox"/></p>	ITEM:	Yes	No	NA	TITLE BLOCK				Project name / title	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Street number	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assessor's map and parcel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Name and address of Owner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Name and address of Engineer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Name and address of Applicant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Revision Date Block	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table border="1" style="width: 100%; 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