

Subdivision Rules and Regulations

Adopted August 6, 2014

ENDORSEMENT OF APPROVAL NOT REQUIRED (ANR) PLAN—Form A

To be filed with the Planning Board, Town of Huntington, Massachusetts

- 1. Deed recorded in Hampshire County Registry of Deeds or Land Court: Book _____ Page _____.
- 2. Street Address: _____
- 3. Assessor's Map: _____ Lot(s): _____ Additional property description: _____
- 4. Number of *parcels in common ownership delineated on plan*: _____
- 5. Check list of filing requirements (Check the items to be supplied - Applications MUST have ALL items.)
 - Original, reproducible (mylar) Plan, with endorsed Seal of a Massachusetts Registered Professional Land Surveyor.
 - Six (6) prints of the Plan.
 - Original and Six (6) copies of the fully completed and endorsed ANR Application form (Form A).
 - Check in the appropriate amount (**\$50 for each parcel in common ownership delineated on plan. (For example, one parcel being split into two has a fee of \$100, whereas two parcels being combined into one has a fee of \$50)**), payable to "Town of Huntington"). **Amount of check:** \$ _____

We believe and understand that:

- 1. The attached plan is not a subdivision as defined in the Massachusetts Subdivision Control Law, and I/we submit it for endorsement by the Planning Board that approval under the abovementioned law is not required; and
- 2. We have provided all the materials required in the checklist above; and
- 3. The plans submitted are now in the public domain and may be copied freely in any form.

Applicant(s) (print or type): _____

Signature: _____

Address: _____

Phone: _____

Owner(s) (print or type): _____

Signature: _____

Address: _____

Phone: _____

Surveyor (print or type): _____ Signature: _____

Address: _____ Phone: _____

Allow 21 days for processing. It is the applicant's responsibility to pick up and submit the original mylar and any other required documents to the Registry of Deeds for recording within the time limits established by the Registry. Additional copies and forms remain with the Town. *Applicant(s) may file one copy of this ANR form with the Town Clerk to protect their appeal rights. Town Clerk must fill out below, if filed.*

Date Submitted: _____ Date Decision Filed: _____

Town Clerk (signature): _____ Town Clerk (signature): _____