Town of New London, NH
General Contact Information
To be submitted with Planning Board
Conditional Use Permit – Accessory Dwelling Unit Application

Owner's Name: Anthony Seminara

Street Address: 52 Bog Rd.

City, State & Zip: New London, NH 03257

Telephone/Cell #: 6037480786

Email Address: TJSeminara@TDS.net

Agent's Name (IF APPLICABLE):

Street Address:

City, State & Zip:

Telephone/Cell #:

Email Address:

I/We (property owners) Anthony Seminara of the land located at 52 Bog., New London, N.H. do hereby authorize (Agent's name) _____ of _____ to serve as my/our Agent for the application submitted to the Town of New London.

Owner's Signature: _____

Date: 10/12/21

Town of New London
Selectmen's Office
OCT 18 2021
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TOWN OF
NEW LONDON, NEW HAMPSHIRE

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CONDITIONAL USE PERMIT (CUP) APPLICATION FOR AN ATTACHED ACCESSORY DWELLING UNIT (ADU) SUBJECT TO PLANNING BOARD REVIEW AND APPROVAL

Property Address: 52 Bog Rd.

Tax Map and Lot Number: 095-035-000

Owner's Name: Seminara

Agent's Name (Acting on behalf of the owner, if applicable): _____

Please submit:

- ✓ See attached separate page -General Contact Information.
- ✓ Completed Conditional Use Permit Application signed by the owner/agent.
- ✓ Written statement indicating the applicant's intent and or purpose for the creation of the ADU.
- ✓ Abutters per RSA 672:3 and RSA 676:4 (d) (1), and abutters within two-hundred (200) feet
- ✓ Fees ($100)
- ✓ Information showing compliance with water supply and sewer/septic requirements.
- ✓ Plan drawn to scale. Indicate on the plan, the scale- for example 1 inch equals 20 feet. Minimum plan size (11 x 17 inches). If a larger paper plan is submitted, please also send a pdf file to the Planning & Zoning Administrator. Plan to include all details:
  - Setbacks
  - Label bedroom(s), kitchen and bathroom; entrance(s) and exit (s); and connecting interior door
  - Exterior dimensions
  - Total square footage of ADU unit
  - Show all off-street parking- label parking spaces
  - Label the domicile of the property owner

By signing this application, I/We acknowledge and grant permission for the Town of New London staff to access the property for review and inspection; that I am authorized to sign the application on behalf of any and all property owners of this property; that the information submitted for review included in this application is true and accurate; and that I have submitted the required information per the provisions of the New London Zoning Ordinance pertaining to an Accessory Dwelling Unit (ADU) for review by the Planning Board. I understand that the ADU unit will be provided a separate 9-1-1 address.

Owner/Agent Signature: _____

Date Signed: 10/17/2021

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Seminara
52 Bog Rd.
New London
6037480786