SITE PLAN REVIEW AND APPROVAL

Supplemental SPA Form A Supplemental Site Plan Information

1.	Name, address and telephone number of applicant(s):				
2.	Name, address and telephone number of owner(s) of record (if different from applicant):				
3.	Address, name, title, description and/or other identification of propose development/activity sufficient to locate the site on the ground and in the town's files:				
4.	General information:				
	a.	Recording information for deed(s) of property (recorded in the South District Middlesex Registry of Deeds and/or Land Court; include copies of deeds):			
		Book; or Land Court Cert. No Book; or Land Court Cert. No Book; or Land Court Cert. No			
	b.	Zoning district(s), and acreage for each district, in which the site is located:			
		Zoning district: ; Acreage: Zoning district: ; Acreage:			
	c.	Information from Assessor's office:			
		Map No; Lot No Map No; Lot No Map No; Lot No			
	d.	Brief description of property locus and surrounding properties (include list of abutters):			
5.	History of the use of the site:				
	a.	Past uses, as researched from readily obtainable sources (cite sources):			
	b.	Present use(s):			
	c.	All zoning variances granted, listed chronologically by case number, with brief description:			

WAYLAND CODE

	d.	All special permits granted, listed chronologically by case number, with brief description:	
	e.	If any part of the site is protected as a nonconforming use or structure, describe:	
6.	Existing site characteristics:		
	a.	Total acreage of site:	
	b.	Total acreage in Floodplain District:; % of total acreage:	
	C.	Total acreage in Aquifer Protection District:; % of total acreage:	
	d.	Total acreage in Watershed Protection District:; % of total acreage:	
	e.	Total acreage in wetlands and wetland buffer areas, as defined by MGL c. 131, § 40:	
		Wetlands:; % of total acreage:	
		Buffers: ; % of total acreage:	
	f.	Total acreage of legally dedicated open space:; % of total acreage:;	
7.	Exi	sting and proposed site improvements:	
	a.	Existing structures, with name and total square footage of footprint and gross floor area of each:	
		Name:; Footprint area:; Gross floor area:;	
		Name:; Footprint area:; Gross floor area:;	
		Name:; Footprint area:; Gross floor area:;	
	Gra	nd totals: Footprint area:; Gross floor area:	
	b.	Proposed structures, with name and total square footage of footprint and gross floor area of each:	
		Name:; Footprint area:; Gross floor area:;	
		Name:; Footprint area:; Gross floor area:;	
		Name:; Footprint area:;	

SITE PLAN REVIEW AND APPROVAL

		Gross noor area:
	Gra	nd totals: Footprint area:; Gross floor area:;
	c.	Total square footage and number of spaces by type of existing parking:
		Area:; Spaces:
	d.	Total square footage and number of spaces by type of proposed parking:
		Area:; Spaces:
	e.	Describe existing and proposed materials used for any impermeable surfaces:
	f.	Describe existing and proposed access to the site:
	8.	Have sewage disposal and drainage impacts been filed with Board of Health? If no, explain, including date to be filed. If yes, attach copy of said filing and summarize said impacts here:
Sig	nature	e(s) and printed name(s) of applicant(s):
		Date:
		Date:
		Date:
Sigi	ature	e(s) and printed name(s) of owner(s) of record, if different:
		Date:
	-	Date:
		Date: