

TOWN OF ATKINSON
CONDITIONAL USE PERMIT

Property Address _____ Map _____ Lot _____

FORM E: NAMES AND ADDRESSES OF ABUTTERS

NOTE: According to State Law (RSA 676:4b), the names and mailing addresses of all abutters must be those indicated in Town records not more than 5 days before the day of filing this application

1. (Applicant) MAP _____ LOT _____

Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

2. MAP _____ LOT _____

Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

3. MAP _____ LOT _____

Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

4. MAP _____ LOT _____

Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

5. MAP _____ LOT _____

Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

6. MAP _____ LOT _____

Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

7. MAP _____ LOT _____

Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

8. MAP _____ LOT _____

Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

9. MAP _____ LOT _____

Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

10. MAP _____ LOT _____

Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

11. MAP _____ LOT _____

Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

12. MAP _____ LOT _____

Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

13. MAP _____ LOT _____
Name: _____
Address: _____
Town: _____ State: _____ Zip: _____

14. MAP _____ LOT _____
Name: _____
Address: _____
Town: _____ State: _____ Zip: _____

15. MAP _____ LOT _____
Name: _____
Address: _____
Town: _____ State: _____ Zip: _____

16. MAP _____ LOT _____
Name: _____
Address: _____
Town: _____ State: _____ Zip: _____