



**TOWN OF DIGHTON**  
**PLANNING BOARD**  
**979 SOMERSET AVENUE**  
**DIGHTON, MA 02715**

**PETITIONER:**

NAME:

ADDRESS:

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LOCATION (from Assessors' Office)

PLAT AND

LOT NOS.

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PRESENT

First Record Date

ZONING

Planning Board Use Only

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DATE OF THIS

File:

DOCUMENT

Title:

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**FORM R**  
**SUBDIVISION WAIVER REQUEST**

Nature of Waiver: \_\_\_\_\_

Subdivision Rules and Regulation Reference: \_\_\_\_\_

Reason the waiver is requested: \_\_\_\_\_

Alternatives to granting the waiver: \_\_\_\_\_

Impact of waiver denial on the project: \_\_\_\_\_

Reasons this waiver is in the best interests of the town and consistent with the intent and purpose of the Subdivision Control Law: \_\_\_\_\_

Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_

Subdivision: \_\_\_\_\_

Signed: \_\_\_\_\_