



TOWN OF GROTON  
SITE/SUBDIVISION PLAN FIELD MODIFICATION  
ADMINISTRATIVE ACTION FORM

TITLE OF PLAN: \_\_\_\_\_

LOCATION: \_\_\_\_\_

MODIFICATION REQUESTED BY (Name, address):

\_\_\_\_\_

\_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

DESCRIPTION OF REQUESTED MODIFICATION (Be Specific):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PLANNING DEPARTMENT ACTION:  APPROVED  DENIED

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ROUTED TO:  Public Works  Building Official  Fire Marshal  
 Ledge Light Health  Utility Company  File  
 Other \_\_\_\_\_

\_\_\_\_\_  
Director of Planning and Development  
or designee

DATE: \_\_\_\_\_

12/04