

**TOWN OF UXBRIDGE  
PLANNING BOARD**  
21 South Main Street  
Uxbridge, MA 01569-1851  
508-278-8600 Ext. 2013 Fax 508-278-8605

**FILL/IMPORTATION PERMIT APPLICATION**

*Non-exempt importation activities require an Importation Permit from the Uxbridge Planning Board pursuant to General Bylaw Chapter 182. Applications for Importation Permits shall include the following:*

- Completed Importation Permit Application & all items described in Gen. Bylaw Chapter 182 (attached)
- New applications must include a certified abutter list and 3 sets of labels from the Assessor's Office
- New applications must include certified return receipt labels, postage, stamps and envelopes required for mailing to abutters (Certified Labels for Public Hearing notices & Stamps for Decision notices)
- Applicant should confirm Zone with Zoning Enforcement Officer
- \*Note: Include any letter from Zoning Enforcement Officer.

Please submit **10 hard copies & 1 electronic copy** of all information to:

Land Use Office  
21 South Main Street, Rm 205  
Uxbridge MA 01569-1851  
[Planning@uxbridge-ma.gov](mailto:Planning@uxbridge-ma.gov)

☐ New Application      ☐ Renewal, Permit Number \_\_\_\_\_

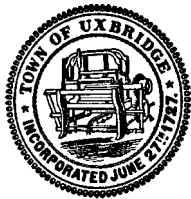
**OFFICE USE ONLY - date received:**

**I. PROPERTY INFORMATION (LOCATION OF PROPOSED IMPORTATION):**

Address:	
Map/Parcel ID(s):	Book/Page:

**II. APPLICANT INFORMATION:**

Printed Name:	Title/Role:
Applicant Signature:	Date:
Mailing Address, City, State, Zip code:	
Phone #:	Email:



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**III. OWNER INFORMATION:**

Printed Name:	Title/Role:
Owner Signature:	Date:
Mailing Address, City, State, Zip code:	
Phone #:	Email:

**IV. BUSINESS INFORMATION:**

Name of Business:	Authorized Agent: Signature & Printed Name
Business Owner's Signature:	Date:
Mailing Address, City, State, Zip code:	
Phone #:	Email:

**V. ADDITIONAL CONTACT INFORMATION:**

Name:	Authorized Agent: Signature & Printed Name
Signature:	Date:
Mailing Address, City, State, Zip code:	
Phone #:	Email:

**FILL/IMPORTATION**  
**Annual Report to the Town of Uxbridge**

Per Chapter 182 of the Town of Uxbridge Bylaws, all holders of permits to import non-exempt fill must submit a report for the preceding 12 months of operation.

**This report must be submitted to the Planning Board on or before the expiration date of your permit.** Attach additional supporting information as necessary.

Permit Number: \_\_\_\_\_ (Renewals)

Permit Holder Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Location of Operation: \_\_\_\_\_

Map(s): \_\_\_\_\_ Parcel(s): \_\_\_\_\_

**IMPORTATION**

Amount of Material Imported (tons): \_\_\_\_\_

Type(s) of Material Imported \_\_\_\_\_

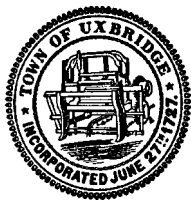
Area filled (square feet or acres) \_\_\_\_\_

**Owner Signature** \_\_\_\_\_

**Applicant Signature** \_\_\_\_\_

**Business Agent Signature** \_\_\_\_\_

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**OFFICE USE ONLY:**

**Public Hearing:**

➤ **Hearing Date:** \_\_\_\_\_

**Prior to Public Hearing:**

a) **Date notice to abutters mailed on** \_\_\_\_\_

b) **Date of Public notice in newspaper** \_\_\_\_\_

c) **Date of notice sent requesting comment (if required/applicable):**

➤ **Board of Health** \_\_\_\_\_

➤ **Conservation Commission** \_\_\_\_\_

➤ **Zoning Enforcement Officer** \_\_\_\_\_

➤ **Graves Engineering** \_\_\_\_\_

➤ **LSP (if different)** \_\_\_\_\_

**Date Granted/Denied:** \_\_\_\_\_

**Attach Conditions/Uxbridge General Bylaws Chapter 182**

**Additional Comments:**