



Conditional Use Permit Application
City of Rochester, New Hampshire

Date: June 3rd, 2014

Property information

Tax map #: 226 ; Lot #(s): 2 ; Zoning district: Agricultural (Agr.)

Property address/location: 40 Bernard Road

Name of project (if applicable): Salmon Falls Disc Golf Course

Property owner

Name (include name of individual): George & Rita Revocable Trust

Mailing address: 40 Bernard Rd Rochester, NH 03868

Telephone #: 332-5218 Fax: _____

Applicant/developer (if different from property owner)

Name (include name of individual): Unified Industries, Ltd

Mailing address: 40 Bernard Rd Rochester, NH 03868

Telephone #: 332-5218 Fax #: _____

~~Engineer/designer~~ and

Name (include name of individual): Denis Grzywacz (ACME Disc Golf)

Mailing address: 43 Ham St Dover NH 03820

Telephone #: 603 493-2695 Fax #: none

Email address: _____ Professional license #: none

Proposed Project

Please describe the proposed project: Disc Golf Course

Please describe the existing conditions: unmanaged forest, formerly pasture, with riding trails

Submission of application

This application must be signed by the property owner, applicant/developer (if different from property owner), and/or the agent.

I/we hereby submit this Conditional Use application to the City of Rochester Planning Board pursuant to the City of Rochester Zoning Ordinance and attest that to the best of my knowledge all of the information on this application form and in the accompanying application materials and documentation is true and accurate. As applicant/developer (if different from property owner)/as agent, I attest that I am duly authorized to act in this capacity.

Signature of property owner: _____

Date: _____

Signature of applicant/developer: 

Date: 6/9/2014

Signature of agent: _____

Date: _____