



# TOWN OF DOVER

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## APPLICATION FOR DOVER TOWN BOARD MEETING

AGENDA DATE REQUESTED: \_\_\_\_\_

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

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NO: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

TOPIC TO BE DISCUSSED:

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PARCEL # (IF APPLICABLE): \_\_\_\_\_

### NOTE:

PLEASE HAVE INFORMATION IN BY 12:00 NOON \_\_\_\_\_