## APPLICATION FOR REVISION OF ZONING REGULATIONS TOWN OF BRIDGEWATER

NAME(S) OF PETITIONERS SIGNATURE OF PETIONERS	ADDRESSE(S) OF PETITIONERS
signed	
signed	
signed	
PHONE NUMBER(S):	
DATE SUBMITTED TO TOWN CLE	ERK
SIGNATURE OF TOWN CLERK	
SPECIFIC SECTIONS OF REGULAT (SITE SECTION NUMBER/LETTER	
SECT.	PAGE
SECT.	PAGE

PROPOSED CHANGES:

(STATE REGULATION AS IT CURRENTLY READS . STATE REGULATION AS IT WOULD READ IF PROPOSED CHANGE IS ADOPTED. ATTACH ADDITIONAL PAGES IF NEEDED.)