



TOWN OF NORTH YARMOUTH
10 VILLAGE SQUARE ROAD
NORTH YARMOUTH, MAINE 04097
PHONE: (207) 829-3705 X204
FAX: (207) 829-3743
WEBSITE: www.northyarmouth.org

CODE OFFICE HOURS
MONDAY -THURSDAY
8:00 AM - 5:00 PM

ROAD ORDINANCE PERMIT APPLICATION

APPLICANT: _____ APPLICANT PHONE #: _____
APPLICANT MAILING ADDRESS: _____
APPLICANT OWNER EMAIL: _____

PROPERTY OWNER: _____ PROPERTY OWNER #: _____
PROPERTY OWNER ADDRESS: _____
PROPERTY OWNER EMAIL: _____

CONTRACTOR: _____ CONTRACTOR PHONE #: _____
CONTRACTOR MAILING ADDRESS: _____

LOCATION/PROPERTY ADDRESS: _____

TAX MAP & LOT NUMBER: _____ SUBDIVISION NAME: _____

PLEASE COMPLETE ONLY THE SECTIONS THAT APPLY TO YOUR REQUEST

ROAD PERMIT: (See Section 7 of the Roadway Ordinance for details)

ANY LEGAL ENCUMBRANCES ON THE LAND UPON WHICH THE PROPOSED ROAD IS LOCATED? _____

WHO WILL OWN THE ROAD FOLLOWING CONTRUCTION? _____

BY WHAT LEGAL INSTRUMENT? _____

WHO WILL BE RESPONBILE FOR ROAD MAINTENANCE? _____

WHAT IS THE ESTIMATED VOLUME OF TRAFFIC? _____

TYPE OF TRAFFIC TO USE THE ROAD? _____

TYPE OF ROAD SURFACE (PAVED/GRAVEL) _____

PLEASE INCLUDE THE FOLLOWING WITH THE PERMIT:

- A LIST OF ANTICIPATED STARTING AND COMPLETION DATES OF EACH PHASE OF THE ROAD CONSTRUCTION
 - A DESCRIPTION OF EROSION AND SEDIMENTATION CONTROL MEASURES TO BE EMPLOYED DURING THE NOTED CONSTRUCTION.
 - A DESCRIPTION OF STORMWATER MANGEMENT AND DRAINAGEWAY PROVISIONS, WITH SUPPORTING ASSUMPTIONS AND CALCULATIONS.
 - AN ILLUSTRATED PLAN (see ordinance 7.4 for details)
 - APPROVED ENTRANCE PERMIT FROM MDOT (if applicable)
-

PROPOSED STREET OPENING: (See Section 9 of the Roadway Ordinance for details)

Purpose of the Street Opening: _____

Specify the time frame of work: _____

PLEASE INCLUDE THE FOLLOWING:

- Explanation of physical extent of the excavation
- A plan with material specifications
- A detailed plan for traffic control & protection
- Any other required permits

TEMPORARY ROAD ENTRANCE: (See Section 7.8 of the Roadway Ordinance for details)

Reason for Temporary Road Entrance: _____

Anticipated use: _____

Weight of vehicles to use entrance: _____

Length of time needed: _____

PLEASE INCLUDE THE FOLLOWING:

- Erosion control measures (include a plan to keep mud and debris from public road surface)
- A certificate of insurance (if not the property owner)
- Any other required permits

CULVERT INSTALLATION: (See Section 9 of the Roadway Ordinance for details)

What is the diameter? _____ Length _____ Type _____

What is the expected timeframe of installation? _____

PLEASE INCLUDE THE FOLLOWING:

- A drainage analysis from a registered State of Maine Professional Engineer, (if required by Road Commissioner)
- A detailed plan for traffic control & protection
- Any other required permits or information relevant to application

EMERGENCY VEHICLE ACCESS EVALUATION: (See Section 7.5 G of the Roadway Ordinance for details)

PLEASE INCLUDE THE FOLLOWING:

- A Road design (if available)

REASON FOR WAIVER REQUEST:

Sign below if instructed by the Chief

I acknowledge that emergency vehicle access may be impossible, involving above average risk to life and property to the address/Map & Lot listed above on this permit.

PROPERTY OWNER_____
DATE

HEREBY CERTIFY THAT THE INFORMATION PROVIDED IS COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

APPLICANT

DATE: _____

ROAD COMMISSIONER

DATE: _____

FIRE/RESCUE CHIEF

DATE: _____

CONDITIONS OF APPROVAL: _____

PERMIT NUMBER: RO _____ TOTAL FEE AMOUNT: _____

CHECK ALL THAT APPLY TO YOUR PROJECT:

TYPE	X	COST	TYPE	X	COST
ROADWAY SIGN INSTALL		\$50.00 +COST	TEMP ENTRANCE		\$50.00
PRIVATE ROAD SIGN REPLACEMENT		\$25.00 +COST	STREET OPENING		\$100.00
ROAD PERMIT APP		\$50.00	CULVERT INSTALL		\$50.00
STREET ENTRANCE		\$50.00	EMERGENCY VEHICLE ACCESS EVALUTATION		\$50.00
SUBTOTAL OF FEES					\$
ADMINISTRATIVE FEE					\$25.00
TOTAL					\$