

## TOWN OF NORTH YARMOUTH PLANNING BOARD REQUEST FOR HEARING

NAME OF APPLICANT:	PHONE #:
EMAIL:	ALT. PHONE#:
FULL ADDRESS:	
PROPERTY ADDRESS:	
MAP: LOT: ZONE:	
AGENT/REPRESENTATIVE (if other):	PHONE #:
EMAIL:	
FULL ADDRESS:	

The undersigned requests the North Yarmouth Planning Board consider the following application for:

Pre-application Sketch Plan Review	Major Subdivision
Minor Subdivision	Site Plan Review
Contract Zoning	
Other (Specify):	

## NOTE TO APPLICANT:

- This form and appropriate materials must be filed at the Code Enforcement Office no later than (fourteen) 14 days prior to the regular meeting of the Board (2<sup>nd</sup> Tuesday monthly). Applications shall be accompanied by all applications fee and materials required by the applicable ordinance(s), checklists and fee schedule.
- 2. All applications shall include all materials and copies as specified on the submittal requirements form.
- 3. All materials in color shall be copied in color.

## **Application Authorization**

I hereby make application to the Town of North Yarmouth for the above-referenced property(ies) and the development as described. To the best of my knowledge, the information provided herein is accurate and is in accordance with the Zoning and Subdivision Ordinances of the Town, except where waivers are requested. The Town of North Yarmouth Planning Board and/or town employees are authorized to enter the property(ies) for purposes of reviewing this proposal and for inspecting improvements as a result of an approval of this proposal. I understand that I am responsible for appearing, or having someone appear on my behalf, at all meetings before the Planning Board.

Signature:	Date:	
Printed Name:		
Please identify yourself (check one):	Agent*: Property Owner:	
	RE ROAD, NORTH YARMOUTH, MAINE 040 07) 829-3705 * FAX: (207) 829-3743	97
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