



TOWN OF NORTH YARMOUTH
10 VILLAGE SQUARE ROAD
NORTH YARMOUTH, MAINE 04097
PHONE: (207) 829-3705 OPTION 1
FAX: (207) 829-3743
WEBSITE: www.northyarmouth.org

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

BUSINESS REGISTRATION FORM

SUBMIT THIS FORM & FEE TO THE CODE ENFORCEMENT OFFICE FOR PROCESSING

APPLICANT: Erin Barker APPLICANT PHONE #: 207-939-7350
APPLICANT MAILING ADDRESS: 187 Portland Ave, Old Orchard Beach ME 04064
APPLICANT EMAIL ADDRESS: erinkinneydvm@gmail.com
PROPERTY OWNER (if different): _____ PROPERTY OWNER #: _____
PROPERTY OWNER ADDRESS: _____
BUSINESS NAME: TBD: likely North Yarmouth Veterinary Hospital
LOCATION/PROPERTY ADDRESS: 1 Walnut Hill Common, North Yarmouth ME 04097
TYPE OF BUSINESS: Veterinary Hospital
DAYS/HOURS OF OPERATION: M-F8a-6p BUSINESS NUMBER: _____
TAX MAP & LOT NUMBER: TM 7 Lot 67 BUSINESS START DATE: 3/1/23
[Signature] _____
APPLICANT SIGNATURE PROERTY OWNER SIGNATURE (if different)
10/3/22 _____
DATE DATE

TOTAL FEE AMOUNT: \$50.00

OFFICE USE ONLY

DATE RECEIVED: _____ ACCOUNT NUMBER: _____
ZONING DISTRICTS:
___ VILLAGE CENTER ___ VILLAGE RESIDENTIAL ___ FARM AND FOREST ___ FLOODPLAN
OVERLAY ZONING DISTRICTS:
___ RESIDENTIAL SHORELAND (100') ___ RESOURCE PROTECTION (150') ___ RESOURCE PROTECTION (250')
___ ROYAL RIVER CORRIDOR OVERLAY ___ GROUND WATER PROTECTION OVERLAY

CEO SIGNATURE

DATE

REV 7/21

Business Proposal Plan: North Yarmouth Veterinary Hospital

Dr. Erin Barker, DVM



1 Walnut Hill Commons, North Yarmouth Maine

TM 7 Lot 67

1. Summary

To operate a full-service veterinary hospital providing medical, surgical, and dental care to companion animals in North Yarmouth and the surrounding towns.

2. Company Description

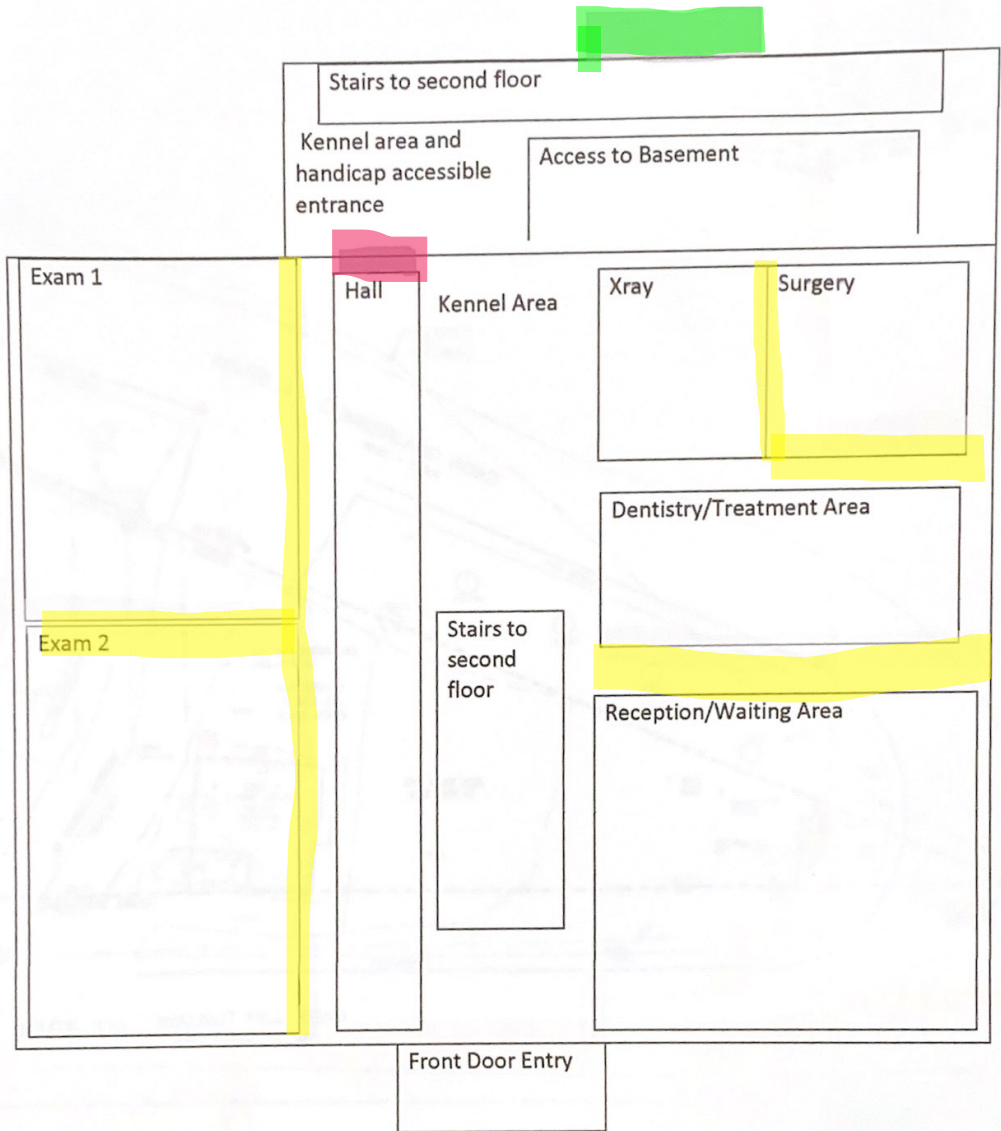
The proposed veterinary hospital would operate out of 1 Walnut Hill Commons. The anticipated opening date would be 03/01/2023. The hospital would provide wellness examinations, vaccinations, medical care, dental care, and surgical procedures for companion animals (including but not limited to dogs, cats, rabbits, ferrets, rodents, and birds). A staff of 3-4 personnel is anticipated. Business hours would be as follows: Monday-Friday 7:30AM- 6:00PM, and Saturday 7:30AM-2:00PM. We would operate on an appointment-only basis, with appointments ranging from 20-30 minutes in length. There will be no after-hours or emergency care provided.

3. Anticipated Building Changes

The installation of several interior walls is planned to allow for the construction of two examination rooms, a surgical suite, an x-ray area, and a treatment area. No changes to the outside structure or appearance of the building are anticipated. There will be no outdoor kennel areas. All kennels will be enclosed inside the building. A sign would be installed on the grass area of the corner of the lot, as well as a sign on the front of the building with the name of the business. The upstairs and the basement of the building are planned to be used for storage. We will have a dumpster installed behind the building. An interior doorway would be created to connect the examination room area with the kennel area of the hospital. See diagram for more explanation.

4. Special Considerations

Given the use of the building, there will be increased dog-walking traffic in the grass area at the corner of the lot where the flagpole is located. We will plan to install two dog waste bag dispensing stands with accompanying trash cans, which will be emptied by our employees. Hospital patients may occasionally need to be walked on the outside grass area, and all waste will be picked up by employees of the hospital. There will be no disposal of medications or animal waste into the water/sewer system. All medication waste will be disposed of properly as required by the DEA. Biohazardous materials will be disposed of appropriately as required by state and federal laws. Regular cleaning/disinfecting agents will be used inside the hospital, and those products used do not require special disposal. We have 11 designated parking spaces for the building, which should be more than adequate for the anticipated number of staff (3-4), as well as the number of people arriving for appointments (2-4 per hour).

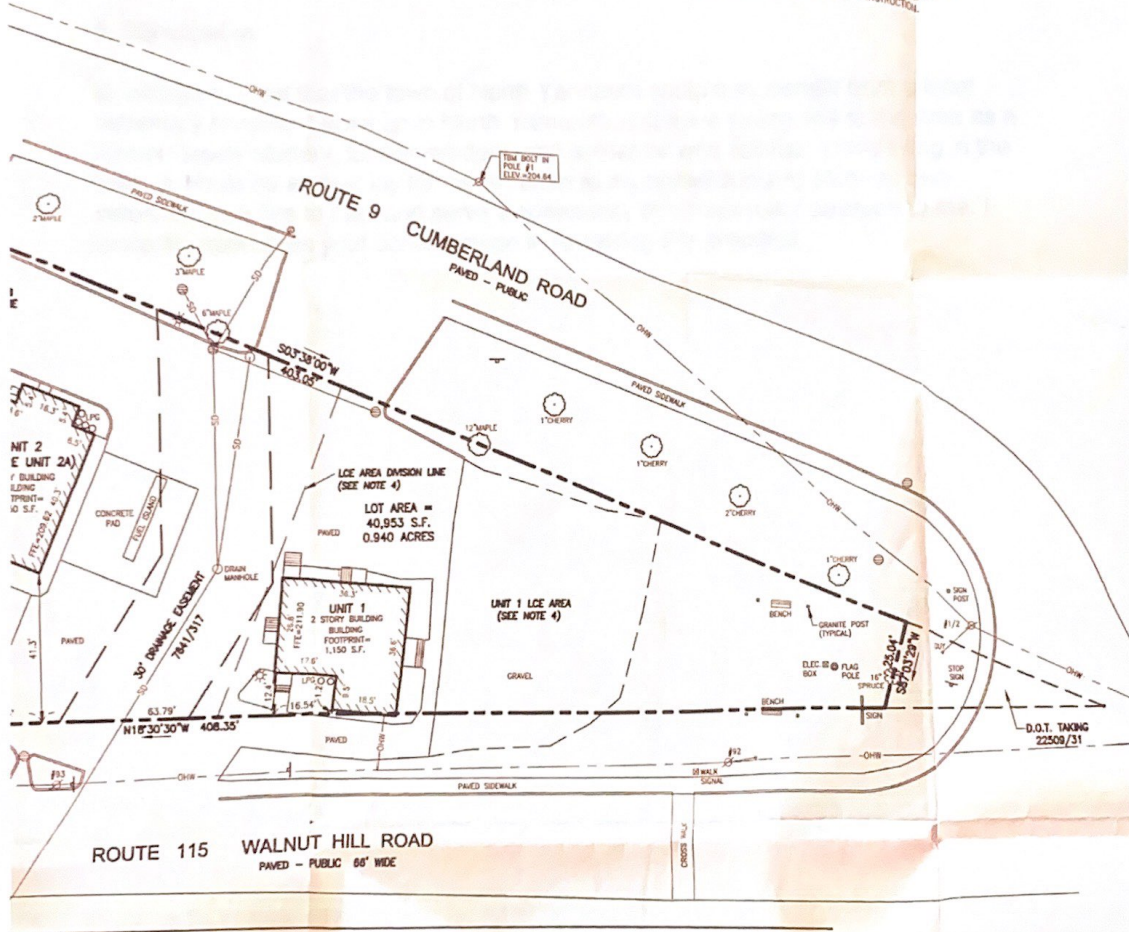


5. Drawing Explanation

The yellow highlighted areas are the proposed new wall constructions. The red highlighted area is a proposed new interior door from the left side of the building to the back part of the building. The green highlighted area is the proposed location for the dumpster.

UTILITY NOTE

THE UNDERGROUND UTILITIES SHOWN HAVE BEEN LOCATED FROM FIELD SURVEY INFORMATION AND EXISTING DRAWINGS. THE SURVEYOR MAKES NO GUARANTEES THAT THE UNDERGROUND UTILITIES SHOWN COMPRISE ALL SUCH UTILITIES IN THE AREA EITHER IN SERVICE OR ABANDONED. THE SURVEYOR FURTHER DOES NOT WARRANT THAT THE UNDERGROUND UTILITIES SHOWN ARE IN THE EXACT LOCATION INDICATED ALTHOUGH HE DOES CERTIFY THAT THEY ARE LOCATED AS ACCURATELY AS POSSIBLE FROM INFORMATION AVAILABLE. THE SURVEYOR HAS NOT PHYSICALLY LOCATED THE UNDERGROUND UTILITIES. THE SURVEYOR HAS NOT PHYSICALLY OSHA CONFINED SPACE REQUIREMENTS. ALL SHIFTS AND PIPE SIZES MUST BE VERIFIED PRIOR TO ANY CONSTRUCTION.



6. ALL REAL ESTATE IS SUBJECT TO SPECIAL DECLARANT RIGHTS OF THE DECLARANT EXCEPT AS OTHERWISE STATED IN THE CONDOMINIUM DECLARATION AND NOTED ON THIS PLAN, INCLUDING THE RIGHT TO ADD ADDITIONAL UNITS AND REAL ESTATE, ALL AS MORE PARTICULARLY DESCRIBED IN SAID DECLARATION, EXCEPT FOR THE REAL ESTATE AND IMPROVEMENTS RELATING TO UNITS 1 AND 2 WHICH MUST BE BUILT. ALL REAL ESTATE, UNITS, AND IMPROVEMENTS ARE SUBJECT TO SPECIAL DECLARANT RIGHTS INCLUDING THE RIGHT TO WITHDRAW IN ACCORDANCE WITH THE MAINE CONDOMINIUM ACT AND

State of Maine, Cumberland SS
 Registry of Deeds
 Received APR 30, 20 15
 at 2:40 PM and recorded in
 Plan Book 217 Page 138
 Attest: [Signature]
 Register

The plan is to divide the right room into the reception/waiting area, and a back room which will include the treatment area, dental area, surgical suite, and x-ray machine. The left room will be divided into two examination rooms and a hallway. The hallway will connect with the back kennel area via the proposed new door. Please note that this drawing is not to scale and is intended to be used for general informational purposes only.

6. Conclusion

In summary, I feel that the town of North Yarmouth could truly benefit from a local veterinary hospital. I grew up in North Yarmouth and have strong ties to the area as a former Greely student, former resident, and someone who still has family living in the town. It would be a great joy for me to return to my hometown and start my own veterinary practice to help and serve a community that has meant so much to me. I sincerely appreciate your consideration in reviewing this proposal.



**TOWN OF NORTH YARMOUTH
PLANNING BOARD
REQUEST FOR HEARING**

NAME OF APPLICANT: Erin Barker PHONE #: 207-939-7350
 EMAIL: erinbarkerdvm@gmail.com ALT. PHONE#: _____
 FULL ADDRESS: 187 Portland Ave Old Orchard Beach, ME 04064
 PROPERTY ADDRESS: 1 Walnut Hill Commons North Yarmouth ME 04097
 MAP: 7 LOT: 67 ZONE: Village Center

AGENT/REPRESENTATIVE (if other): _____ PHONE #: _____
 EMAIL: _____
 FULL ADDRESS: _____

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

- | | | | |
|-------------------------------------|---------------------------------------|-------------------------------------|-------------------|
| <input type="checkbox"/> | Pre-application Sketch Plan Review | <input type="checkbox"/> | Major Subdivision |
| <input type="checkbox"/> | Minor Subdivision | <input checked="" type="checkbox"/> | Site Plan Review |
| <input type="checkbox"/> | Contract Zoning | | |
| <input checked="" type="checkbox"/> | Other (Specify): <u>Change of Use</u> | | |

NOTE TO APPLICANT:

1. 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 (2nd 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: 11/14/2022
 Printed Name: Erin Barker

Please identify yourself (check one): Agent*: Property Owner:

10 VILLAGE SQUARE ROAD, NORTH YARMOUTH, MAINE 04097
 PHONE: (207) 829-3705 * FAX: (207) 829-3743



**TOWN OF NORTH YARMOUTH
PLANNING BOARD
FEE CALCULATION SHEET**

NAME OF APPLICANT: Erin Barker
PROPERTY ADDRESS: 1 Walnut Hill Commons North Yarmouth ME 04097
MAP: 7 LOT: 67

SITE PLAN FEES

<u>Description</u>	<u>Fees</u>	<u>Total</u>
Preliminary Sketch Plan Review	\$0	
Site Plan Review Permit	\$250.00	<u>250.00</u>
Amendment to Site Plan Review Permit	\$75.00	

SUBDIVISION APPROVAL FEES
MINOR SUBDIVISION (4 lots or less)

<u>Description</u>	<u>Fees</u>	<u>Total</u>
Non-refundable Application Fee	\$250.00	
Each Lot/Dwelling Unit	\$100.00	
Technical Review	Cost + \$25.00	

MAJOR SUBDIVISION (5 lots or more)

<u>Description</u>	<u>Fees</u>	<u>Total</u>
Non-refundable Application Fee	\$350.00	
Each lot/Dwelling Unit	\$100.00	
Technical Review	Cost + \$25.00	

TOTAL FEES REQUIRED 250.00

NOTE: Certain Subdivisions will be required to complete a Site Plan Review Permit. Review fees are not typically refundable. If extenuating circumstances occur, the Board may consider a partial or full refund.

10 VILLAGE SQUARE ROAD, NORTH YARMOUTH, MAINE 04097
PHONE: (207) 829-3705 * FAX: (207) 829-3743

Payment Receipt Confirmation

Your payment was successfully processed.

Transaction Summary

Description	Amount
Municipal Forms and Applications – Online	\$250.00
Service Fee	\$6.25
Maine.gov Total	\$256.25

Thank you for your submission, your request will be reviewed by your municipality. In the event that more information is needed you will be contacted directly by a municipal representative.

Customer Information

Customer Name	Erin Barker	Receipt Date	11/15/2022
Local Reference...	1513511749	Receipt Time	08:52:08 AM EST

Payment Information

Payment Type	Credit Card	Credit Card Nu...	*****1817
Credit Card Type	VISA	Order ID	64299690

Billing Information

Billing Address	187 Portland Ave	Phone Number	2079397350
Billing City, State	Old Orchard Beach, ME	This receipt has been emailed to the address below.	
ZIP/Postal Code	04064	Email Address	erinjkinney@gmail.com
Country	US		



TOWN OF NORTH YARMOUTH
PLANNING BOARD

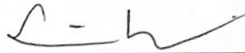
SITE PLAN REVIEW AND CONDITIONAL USE APPLICATION

(See Section 4 pages 23 through 36 of the North Yarmouth Land Use Ordinance)

NAME OF APPLICANT: Erin Barker PHONE #: 207-939-7350
EMAIL: erinbarkerdvm@gmail.com ALT. PHONE#: _____
FULL ADDRESS: 187 Portland Ave Old Orchard Beach ME 04064
PROPERTY ADDRESS: 1 Walnut Hill Commons North Yarmouth ME 04097
MAP: 7 LOT: 67

AGENT/REPRESENTATIVE (if other): _____ PHONE #: _____
EMAIL: _____
FULL ADDRESS: _____

- Names and Addresses of ALL property owners within 500' of any and all property boundaries (use a separate sheet). Please contact the code office for an updated list)
- Plan preparer information if other than property owner:
Name: _____
Address: _____
Phone Number: _____ Professional Lic. # _____
Email: _____
- Zoning Classification of the Property
 Village Center _____ Village Residential _____ Farm and Forest
 Shoreland Residential _____ Resource Protection _____ Royal River Overlay
 Groundwater Protection Overlay
- Provide a General Description of the proposed use or activity, including but not limited to the type of use, square footage involved, hours of operation, types and amount of traffic to be generated (use separate sheet).
- Historic Structures: Are there any historic structures or areas of historical importance on the property? _____ YES NO
- Complete List of all chemicals, pesticides, fuels, nutrients and other potentially toxic or hazardous materials to be used or stored on the premises, and the quantities of these materials (use a separate sheet).
- List of Equipment to be used, parked or stored (use a separate sheet).
- To the best of my knowledge, all the above-stated information, and all prepared submissions in this application are correct.


Signature of Applicant/Owner

11 | 14 | 2022
Date

AGREEMENT FOR THE PURCHASE AND SALE OF REAL ESTATE

This AGREEMENT made and entered into this 3 day of October 2022, by and between ERIN BARKER ("Buyer") and GUIDI REAL ESTATE LLC of 319 MAIN ST. CUMBERLAND MAINE ("Seller").

WITNESSETH AS FOLLOWS:

1. **PURCHASE AND SALE.** Seller agrees to sell and Buyer agrees to buy, on the terms and conditions hereinafter set forth certain real estate with buildings thereon located at 1 WALNUT HILL COMMON in NORTH YARMOUTH MAINE, all as more particularly described in a Deed recorded on the Cumberland County Registry of Deeds in Book 254019, Page 1 (hereinafter the "Premises").

2. **PURCHASE PRICE.** Subject to any adjustments and pro-rations hereinafter described, Buyer agrees to pay for the Premises the sum of Four Hundred and Seventeen Thousand Dollars (\$417,000) payable as follows:

(a) The sum of Five Thousand Dollars (\$5000.00) as a deposit (the "Deposit"), which shall be held by GUIDI REAL ESTATE LLC and shall be credited towards the purchase price at the closing.

(b) The balance of the purchase price shall be paid to Seller at closing in immediately available funds by certified check or checks or by wire transfer in accordance with wiring instructions provided by Seller.

3. **TITLE.** Seller shall convey the Premises at the closing to Buyer by WARRANTY DEED with Covenants, free and clear of all title defects, liens and encumbrances. Seller shall convey all leases, rentals and related income by proper assignment thereof. Buyer shall have ninety (25) days from the date of this Agreement in which to give Seller written notice of any alleged title defects in the Premises and any unacceptable liens, easements or encumbrances affecting the Premises. Seller shall, in good faith, undertake to clear any alleged title defects, unacceptable liens, easements and encumbrances identified by Buyer. In the event that Seller is unable to cure any such title defects within thirty (30) days after written notice from Buyer, then this contract may be terminated by Buyer by giving Seller written notice within ten (10) days of the expiration of the thirty (30) day cure period referenced above and the Deposit shall be returned to Buyer and neither party shall have any further obligation hereunder.

4. **CLOSING.** The closing shall take place at a mutually convenient place and time on or Before Nov. 21, 2022

Seller further agrees to execute and deliver to Buyer at the closing the following documents: (i) a Certificate of Non-Foreign Status (as required by Internal Revenue Service regulations); (ii) a title insurance "Seller's Affidavit" regarding mechanics liens and persons in possession; (iii) an affidavit regarding underground storage tanks (as required by Maine Law).

5. RISK OF LOSS, DAMAGE AND INSURANCE.

(a) All risk of loss to the Premises prior to the closing shall be borne by Seller, except and unless the loss was caused by Buyer. Seller shall keep the Premises insured against fire and other extended coverage risks until the closing.

(b) In the event that, prior to the closing, the improvements which are part of the Premises are destroyed or substantially damaged, Buyer may either (i) terminate this Agreement and receive back the Deposit, (ii) close pursuant to the terms of this Agreement but the purchase price shall be reduced by the amount of the insurance proceeds to be paid to seller or (iii) accept the insurance proceeds payable by reason of such damage or destruction and close this transaction notwithstanding the same and without reduction in the Purchase Price.

6. INSPECTION/DELIVERY OF INFORMATION. Buyer may enter on to the Premises at reasonable times designated by Seller prior to the closing in order to inspect the Premises, conduct surveys, engineering studies and test borings and to do such things as are reasonably necessary with respect to its due diligence and acquisition of the Premises. Buyer agrees to provide copies of all surveys, studies and inspections to Seller and not to disclose the results thereof to any third party except to prospective lenders and except as may be required by applicable law. Buyer agrees to and does hereby indemnify and hold harmless Seller against any loss, cost, damage, claims or expense which may arise from its or its agents', employees' or contractors' activities at the Premises.

Within five (5) days of the effective date of this Agreement, Seller shall deliver to Buyer any and all information it has concerning the Premises, including but not limited to surveys, environmental reports, proposed development plans, title reports and policies, tax bills, notices and letters received within the last five (5) years from every city, state or federal department or agency and any abutter or neighbor.

7. POSSESSION OF THE PREMISES. The Premises shall be delivered to the Buyer at the time of the closing free and clear of all tenancies or occupancies by any person or entity.

8. REPRESENTATIONS OF SELLER. Seller represents to Buyer the following:

(a) Seller has not received any notices of any violation at the Premises of any applicable laws, ordinances, or environmental regulations.

(b) All outstanding bills and/or accounts payable concerning the Premises are either paid or will be paid prior to or at the time of closing.

(c) Buyer acknowledges that except as specifically set forth in this paragraph, Seller makes and has made no covenant, representation or warranty as to the suitability of the Premises for any purpose whatsoever or as to the physical condition of the Premises. Seller is not aware of any environmental contamination of the Premises.

9. DEFAULT AND REMEDIES. In the event that Buyer fails to close hereunder for a reason other than the default of Seller, Seller's sole remedy shall be the retention of the Deposit as full and complete liquidated damages in lieu of any other legal or equitable remedy. In the event that Seller fails to close hereunder for a reason other than the default of Buyer, Buyer shall have available to it all legal and equitable remedies including the right to specifically enforce the provisions of this Agreement.

10. BROKERAGE. Seller and Buyer represent and warrant to each other that neither party has engaged the services of any real estate broker with respect to this transaction.

11. ADJUSTMENTS, PRORATIONS AND CLOSING COSTS.

(a) Real estate taxes, assessments, rentals, common area maintenance charges and utilities shall be prorated as of the closing.

(a) The Maine real estate transfer tax shall be shared equally by Buyer and Seller.

(c) The recording fee for the deed of conveyance will be paid by Buyer.

(d) A portion of the purchase price shall be withheld at the closing by Buyer if required by 36 M.R.S.A. § 5250-A.

12. GENERAL PROVISIONS. This instrument may be executed in multiple originals and is to be construed under the laws of Maine. The use of the masculine gender shall include the feminine and neuter where appropriate. If two or more persons are named herein as Buyer, their obligations hereunder shall be joint and several. Time is of the essence of this Agreement. This Agreement is binding upon and inures to the benefit of the parties hereto, their respective heirs, successors and assigns, and may be

canceled, modified, or amended only by a writing executed by the parties hereto or their legal representatives. All notices, demands and other communications hereunder shall be in writing and shall be deemed to have been duly given on the date of service if served personally on the party to whom notice is to be given or on the date of mailing if mailed by first class mail.

13 EFFECTIVE DATE OF AGREEMENT. The Effective Date of this Agreement shall be the date last signed below by the Buyer or Seller. Buyer's offer to purchase the Premises under the terms as set forth in this Agreement shall be deemed withdrawn unless both Seller executes the Agreement within three (3) days of the date signed by Buyer.

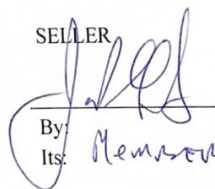
14 CONTINGENCIES This Contract is contingent on the Buyer being satisfied to the following:

- Inspection of the Building and it's systems
- Town Approval for the use of a Veterinarian Clinic
- Review of the Condo Documents and it's Fees
- To confirm that a Handicapped Bathroom will not be required

IN WITNESS WHEREOF, Seller and Buyer have executed this Agreement as of the date first above written.

WITNESS:

SELLER

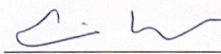


By:
Its:

Menson

Date: 10/2/22

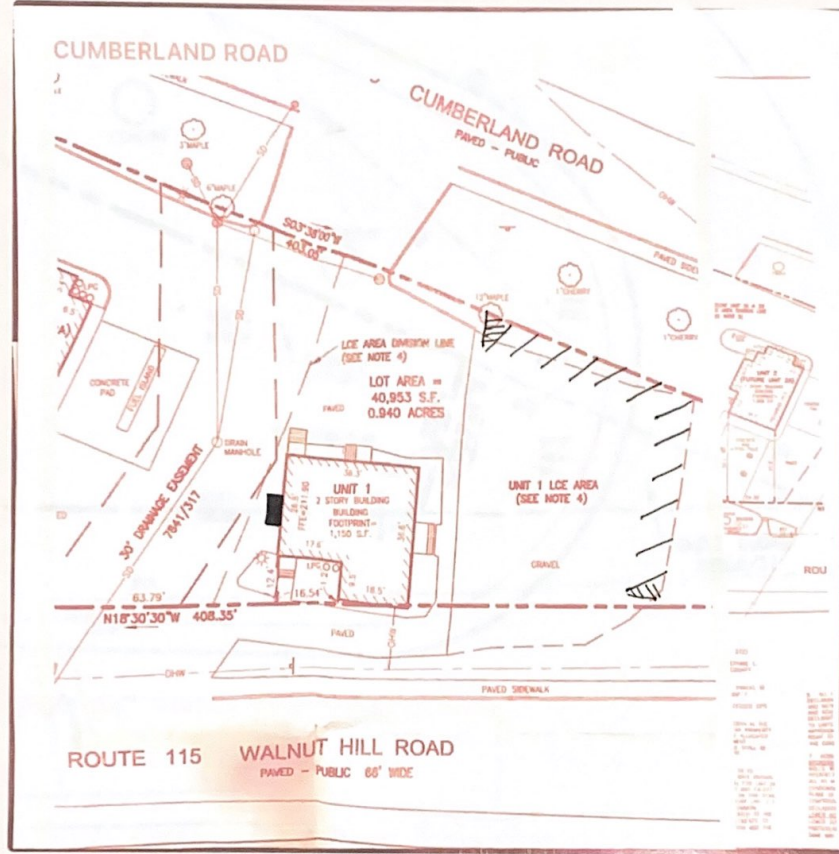
BUYER



By:
Its:

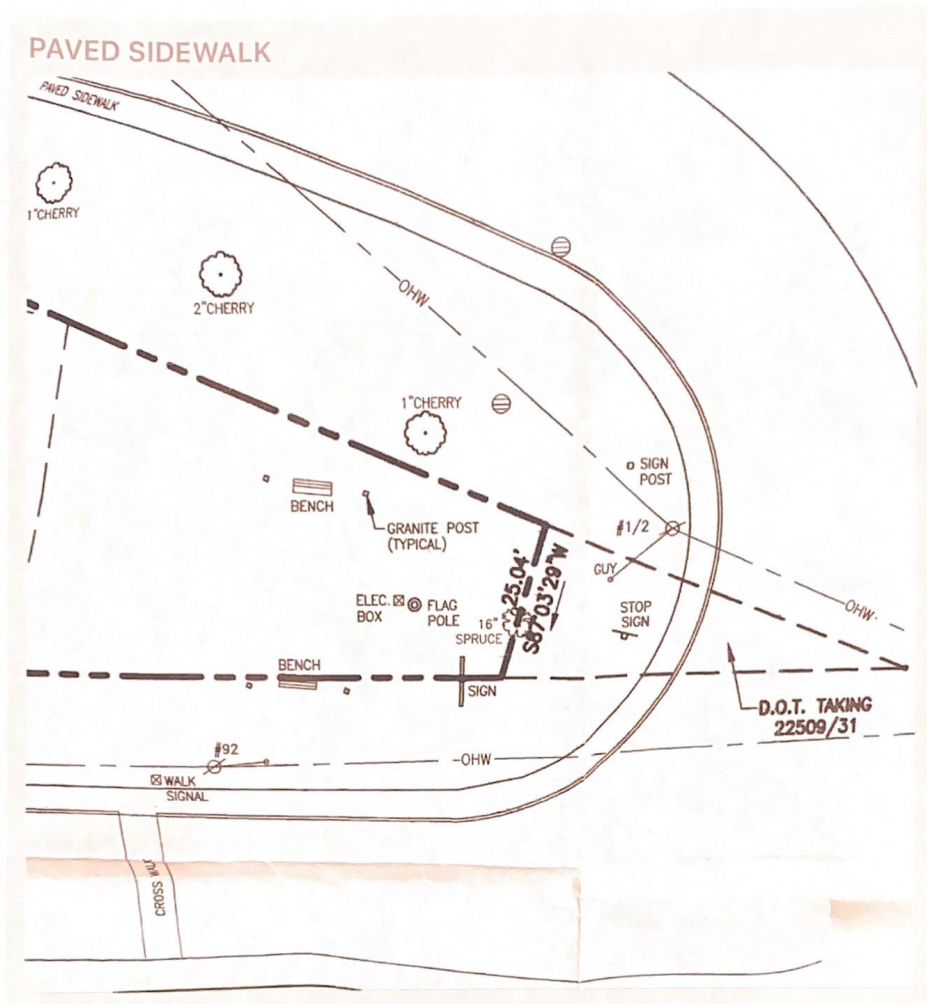
Date: 10/3/2022

CUMBERLAND ROAD



■ - Dumpster (2 yard size, 3' x 3' x 6')
 Enclosed with 8 foot picket privacy fence.
 5' x 8' x 5' dimensions. (Wood)

parking spaces exist with existing outlines



- using existing signposts to mount a 8' x 3' Aluminum composite sign





MILLS

kw
KELLERWILLIAMS
REALTY

FOR SALE
Commercial

Don L'Heureux
207-553-1366
Randy Plummer
207-420-0586



View in Your Space

SEVERE WEATHER

6-ft x 8-ft Pressure Treated Spruce
Pine Fir Gothic Privacy Fence Panel

\$57.98

Item #: 51512 | Model #: 73000479

Aisle 1

Bay 1

ABUTTER NOTIFICATION

Date: 11/26/2022

Subject Property Location:
1 Walnut Hill Commons
North Yarmouth ME 04097

To:

You have been identified as an abutter to the above property location. This letter is to inform you that I am submitting an application to the Town of North Yarmouth Planning Board for a proposed small animal general practice veterinary hospital located at 1 Walnut Hill Commons.

The application will be presented at the planning board meeting to be held on December 13th, 2022 at 7:00 PM. The location of the meeting is Wescustogo Hall & North Yarmouth Community Center, located at Memorial Highway #120 North Yarmouth ME 04097.

I look forward to addressing any questions or concerns that you may have regarding my veterinary practice at the meeting. Thank you for your time and consideration.

Sincerely,

Erin Barker, DVM
North Yarmouth Veterinary Hospital

858 3658 5692 0000 026T T202

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To
 Matthew Wacikowski
 Street and Apt. No., or PO Box No.
 434 Walnut Hill Rd
 City, State, ZIP+4®
 North Yarmouth ME 04097
 PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

1498 3644 5692 0000 026T T202

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Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To
 Holly and Maddens Day
 Street and Apt. No., or PO Box No.
 55 Hallwell Rd
 City, State, ZIP+4®
 North Yarmouth ME 04097
 PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

8098 3644 5692 0000 026T T202

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Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To
 Construction Aggregates Inc
 Street and Apt. No., or PO Box No.
 P.O. Box 307
 City, State, ZIP+4®
 Cumberland ME 04021
 PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

0582 3658 5692 0000 026T T202

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Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To
 Adrian Bojorguez Horn
 Street and Apt. No., or PO Box No.
 96 Raymond Road Rd
 City, State, ZIP+4®
 Durham ME 04222
 PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

8252 3644 5692 0000 026T T202

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OFFICIAL USE

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Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To
 Melonie and Christopher Gordon
 Street and Apt. No., or PO Box No.
 11 Stone Post Ln
 City, State, ZIP+4®
 North Yarmouth ME 04097
 PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

2452 3644 5692 0000 026T T202

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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OFFICIAL USE

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Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To
 Striebold Homeowners Association
 Street and Apt. No., or PO Box No.
 3 Striebold Ln
 City, State, ZIP+4®
 North Yarmouth ME 04097
 PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 1970 0000 7895 3504

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To John and Ashley Maclean
Street and Apt. No., or PO Box No.
23 Jone Post Ln
City, State, ZIP+4®
North Vermont ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 5692 0000 0267 2651

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OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Matthew and Eileen Delaney
Street and Apt. No., or PO Box No.
7 Engleway Ln
City, State, ZIP+4®
North Vermont ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 1970 0000 7895 3443

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To John Bunby
Street and Apt. No., or PO Box No.
6 Engleway Ln
City, State, ZIP+4®
North Vermont ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 5692 0000 0267 2201

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Jeffrey and Kate Payne
Street and Apt. No., or PO Box No.
5 Engleway Ln
City, State, ZIP+4®
North Vermont ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 1970 0000 7895 3429

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Ryan and Emily Jennings
Street and Apt. No., or PO Box No.
10 Engleway Ln
City, State, ZIP+4®
North Vermont ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 5692 0000 0267 2201

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Walnut Hill Investment LLC
Street and Apt. No., or PO Box No.
PO Box 307
City, State, ZIP+4®
Cambridge ME 04021

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 1970 0000 7895 3368

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Jane L Howe
Street and Apt. No., or PO Box No.
51 Memorial Highway
City, State, ZIP+4®
Norwich Vermont ME 05097

Postmark Here
NOV 26 2022

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 1970 0000 7895 3344

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Halbro Properties LLC
Street and Apt. No., or PO Box No.
56 Strawberry Edge Ln
City, State, ZIP+4®
Cambridge ME 04021

Postmark Here
NOV 2 2022

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 1970 0000 7895 3320

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Margaret LeBlanc and James Boyle
Street and Apt. No., or PO Box No.
98 Brown Cove Rd
City, State, ZIP+4®
Windsor ME 04062

Postmark Here
NOV 26 2022

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

2982 5682 0000 0267 1201

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Kieran Paston
Street and Apt. No., or PO Box No.
3 Range Way Ln
City, State, ZIP+4®
Norwich Vermont ME 05077

Postmark Here
NOV 26 2022

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

1552 5682 0000 0267 1201

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Gravies Home Construction LLC
Street and Apt. No., or PO Box No.
40 Farm Gate Rd
City, State, ZIP+4®
Falmouth ME 04105

Postmark Here
NOV 6 2022

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

2982 5682 0000 0267 1201

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To Custom Build Homes of Maine LLC
Street and Apt. No., or PO Box No.
125 Weston Promenade
City, State, ZIP+4®
Portland ME 04102

Postmark Here
NOV 26 2022

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 1970 0000 7895 2668

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Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To
Daniel and Shelby Hando
Street and Apt. No., or PO Box No.
7 Rongeray Ln
City, State, ZIP+4®
North Yarmouth ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

5692 7892 0000 0261 T202

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Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To
Ryan and Tia Eidemiller
Street and Apt. No., or PO Box No.
8 Rongeray Ln
City, State, ZIP+4®
North Yarmouth ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 1970 0000 7895 3405

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Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To
Melissa and Travis Lemasters
Street and Apt. No., or PO Box No.
11 Rongeray Ln
City, State, ZIP+4®
North Yarmouth ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

4743 5692 0000 0261 T202

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Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To
Richard and Tanja Bendixon
Street and Apt. No., or PO Box No.
40 Farm Gate Rd
City, State, ZIP+4®
Falmer ME 04105

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 1970 0000 7895 3412

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Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To
David Riccio and Meghan Devine
Street and Apt. No., or PO Box No.
12 Rongeray Ln
City, State, ZIP+4®
North Yarmouth ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

4743 5692 0000 0261 T202

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Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To
Diana L Talarico Living Trust
Street and Apt. No., or PO Box No.
19 Stone Post Ln
City, State, ZIP+4®
North Yarmouth ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 1970 0000 7895 3498

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OFFICIAL USE

Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
\$

Total Postage and Fees
\$



Sent To
Street and Apt. No., or PO Box No.
Brian and Jennifer Peratore

City, State, ZIP+4®
21 Long Rd. to North Yarmouth ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

4955 5682 0000 0467 T202

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Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
\$

Total Postage and Fees
\$



Sent To
Street and Apt. No., or PO Box No.
Janet Gudi and Allan Ayoub

City, State, ZIP+4®
319 Main St. Cumberland ME 04021

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 1970 0000 7895 3511

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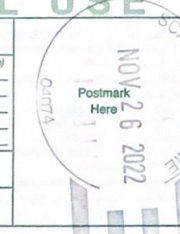
Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
\$

Total Postage and Fees
\$



Sent To
Street and Apt. No., or PO Box No.
Jennifer Cook

City, State, ZIP+4®
6 Stone Post Ln North Yarmouth ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

4955 5682 0000 0467 T202

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OFFICIAL USE

Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
\$

Total Postage and Fees
\$



Sent To
Street and Apt. No., or PO Box No.
Town of North Yarmouth

City, State, ZIP+4®
10 Village Square Rd North Yarmouth ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

4552 5682 0000 0467 T202

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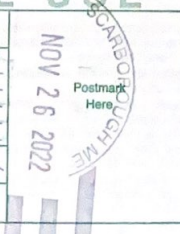
Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
\$

Total Postage and Fees
\$



Sent To
Street and Apt. No., or PO Box No.
Gudi Real Estate

City, State, ZIP+4®
319 Main St. Cumberland ME 04021

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

4552 5682 0000 0467 T202

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Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage
\$

Total Postage and Fees
\$



Sent To
Street and Apt. No., or PO Box No.
Joseph Lucey and Marsha Landiff

City, State, ZIP+4®
482 Walnut Hill Rd North Yarmouth ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/>	Return Receipt (hardcopy)	\$
<input type="checkbox"/>	Return Receipt (electronic)	\$
<input type="checkbox"/>	Certified Mail Restricted Delivery	\$
<input type="checkbox"/>	Adult Signature Required	\$
<input type="checkbox"/>	Adult Signature Restricted Delivery	\$

Postage \$

Total Postage and Fees \$

Sent To
 Mgm Builders
 Street and Apt. No., or PO Box No.
 8 Irving Unit Dr
 City, State, ZIP+4®
 Wadsworth ME 04092

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/>	Return Receipt (hardcopy)	\$
<input type="checkbox"/>	Return Receipt (electronic)	\$
<input type="checkbox"/>	Certified Mail Restricted Delivery	\$
<input type="checkbox"/>	Adult Signature Required	\$
<input type="checkbox"/>	Adult Signature Restricted Delivery	\$

Postage \$

Total Postage and Fees \$

Sent To
 Nt Smith LLC
 Street and Apt. No., or PO Box No.
 43 The Lane
 City, State, ZIP+4®
 North Yarmouth ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/>	Return Receipt (hardcopy)	\$
<input type="checkbox"/>	Return Receipt (electronic)	\$
<input type="checkbox"/>	Certified Mail Restricted Delivery	\$
<input type="checkbox"/>	Adult Signature Required	\$
<input type="checkbox"/>	Adult Signature Restricted Delivery	\$

Postage \$

Total Postage and Fees \$

Sent To
 Edward + Joyce Gervais
 Street and Apt. No., or PO Box No.
 81 Gony Rd
 City, State, ZIP+4®
 North Yarmouth ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Certified Mail Fee \$4.00

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/>	Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/>	Return Receipt (electronic)	\$0.00
<input type="checkbox"/>	Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/>	Adult Signature Required	\$0.00
<input type="checkbox"/>	Adult Signature Restricted Delivery	\$0.00

Postage \$0.60

Total Postage and Fees \$4.60

Sent To
 David McHigac
 Street and Apt. No., or PO Box No.
 428 Walnut Hill Rd
 City, State, ZIP+4®
 North Yarmouth ME 04097

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Parcel Number	Property Address	Owner Name	Owner Address	Owner City	Owner State	Owner Zip
007-030	428 WALNUT HILL RD	MESSINGER, DAVID J	428 WALNUT HILL RD	NORTH YARMOUTH	ME	04097
007-031	434 WALNUT HILL RD	WASIELEWSKI, MATTHEW J.	434 WALNUT HILL ROAD	NORTH YARMOUTH	ME	04097
007-032	440 WALNUT HILL RD	DAY, HOLLY J. & THADDEUS	55 HALLOWELL RD	NORTH YARMOUTH	ME	04097
007-033	448 WALNUT HILL RD	N L SMITH, LLC	43 THE LANE	NORTH YARMOUTH	ME	04097
007-034-001	43 VILLAGE SQUARE LN	GERVAIS, EDWARD & JOYCE	81 GRAY RD	NORTH YARMOUTH	ME	04097
007-034-014	42 VILLAGE VIEW LN	MGM BUILDERS	8 TURNING LEAF DR	WINDHAM	ME	04062
007-034-015	0 WALNUT HILL RD	CONSTRUCTION AGGREGATE INC	PO BOX 307	CUMBERLAND	ME	04021
007-035	464 WALNUT HILL RD	HORN, ADRIAN BOJORQUEZ	96 RUNAROUND POND RD	DURHAM	ME	04222
007-036	482 WALNUT HILL RD	LUCEY, JOSEPH A. & MAUREEN P. (TARDIFF)	482 WALNUT HILL RD	NORTH YARMOUTH	ME	04097
007-064	10 VILLAGE SQUARE RD	NORTH YARMOUTH, TOWN OF	10 VILLAGE SQUARE ROAD	NORTH YARMOUTH	ME	04097
007-065	475 WALNUT HILL RD	Same as 007-064				
007-066	463 WALNUT HILL RD	Same as 007-064				
007-067-001	0 WALNUT HILL COMMONS	GUIDI REAL ESTATE	319 MAIN STREET	CUMBERLAND	ME	04021
007-069	425 WALNUT HILL RD	STONEPOST HOMEOWNERS ASSOCIATION	3 STONEPOST LN	NORTH YARMOUTH	ME	04097
007-069-001	3 STONE POST LANE	GUIDI, JAMES & AYOUB, ALICE	319 MAIN STREET	CUMBERLAND	ME	04021
007-069-002	11 STONE POST LANE	GORDON, MELANIE J & CHRISOPHER D	11 STONE POST LANE	NORTH YARMOUTH	ME	04097
007-069-003	6 STONE POST LANE	COOK, JENNIFER L	6 STONEPOST LN	NORTH YARMOUTH	ME	04097
007-069-004	23 STONE POST LANE	MACLEARN, JOSHUA & ASHLEY	23 STONE POST LN	NORTH YARMOUTH	ME	04097
007-069-005	21 STONE POST LANE	PERAZONE, BRIAN & JENNIFER	21 STONE POST LANE	NORTH YARMOUTH	ME	04097
007-069-006	19 STONE POST LANE	TALARICO LIVING TRST, DONNA L	19 STONE POST LANE	NORTH YARMOUTH	ME	04097
007-070-001	0 MEMORIAL HIGHWAY	Same 007-034-015				
007-070-002	4 RANGEWAY LN	BENDIXON, JR. RICHAR & TANJA	40 FARM GATE ROAD	FALMOUTH	ME	04105
007-070-003	6 RANGEWAY LN	BUMBY, JOHN H	6 RANGEWAY LN	NORTH YARMOUTH	ME	04097
007-070-004	8 RANGEWAY LN	EIDEMILLER, RYAN & TIA	8 RANGEWAY LN	NORTH YARMOUTH	ME	04097
007-070-005	10 RANGEWAY LN	JENNINGS, RYAN J & EMILY N	10 RANGEWAY LN	NORTH YARMOUTH	ME	04097
007-070-006	12 RANGEWAY LN	RIEMER, DAVID RYAN & DEVINE, MEAGHAN ERIN	12 RANGEWAY LN	NORTH YARMOUTH	ME	04097
007-070-017	11 RANGEWAY LN	LEMASTERS, MELISSA P & TRAVIS C	11 RANGEWAY LN	NORTH YARMOUTH	ME	04097
007-070-018	9 RANGEWAY LN	DELANEY, MATTHEW L & EILEEN M	9 RANGEWAY LN	NORTH YARMOUTH	ME	04097
007-070-019	7 RANGEWAY LN	HONDO, DANIEL T & SHELBY L	7 RANGEWAY LN	NORTH YARMOUTH	ME	04097
007-070-020	5 RANGEWAY LN	PAYNE, JEFFREY S & KATIE L	5 RANGEWAY LN	NORTH YARMOUTH	ME	04097
007-070-021	3 RANGEWAY LN	PRESTON, KEIRAN L	3 RANGEWAY LN	NORTH YARMOUTH	ME	04097
007-070-022	19 MEMORIAL HIGHWAY	same as 007-034-015				
007-070-023	5-7 MEMORIAL HIGHWAY	WALNUT HILL INVESTMENTS LLC	PO BOX 307	CUMBERLAND	ME	04021
007-071	40 MEMORIAL HIGHWAY	same as 007-064				
007-072	51 MEMORIAL HIGHWAY	HOWE, JAMES G.	51 MEMORIAL HIGHWAY	NORTH YARMOUTH	ME	04097
007-073-001	0 MEMORIAL HIGHWAY	same as 007-072				
007-34A-001	0 WILDLIFE LN	Same as 007-034-014				
007-34A-002	17 WILDLIFE LN	GRAIVER HOME CONSTRUCTION LLC	40 FRAM GATE RD	FALMOUTH	ME	04105
007-34A-018	0 WILDLIFE LN	HASBRO PROPERTIES, LLC	56 STRAWBERRY RIDGE LN	CUMBERLAND	ME	04021
007-34A-019	14 SPILLWAY DR	CUSTOM BUILT HOMES OF MAINE LLC	125 WESTERN PROMEDADE	PORTLAND	ME	04102
007-34A-020	0 SPILLWAY DR	Same as 007-34A-018				
007-34A-021	14 WILDLIFE LN	Same as 007-034-015				
007-34A-022	4 WILDLIFE LN	Same as 007-034-015				
007-34A-024	22 WILDLIFE LN	LEBLANC, MARGARET M & BOYLE, JAMES G	98 BROWN COVE RD	WINDHAM	ME	04062

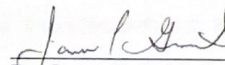
WARRANTY DEED
Maine Statutory Short Form

KNOW ALL BY THESE PRESENTS, That **Guidi Real Estate, LLC**, a Maine limited liability company with a place of business in Cumberland in the County of Cumberland and State of Maine, for consideration paid, grants to **Erin K. Barker**, whose mailing address is 187 Portland Ave, Old Orchard Beach, ME 04064, with **WARRANTY COVENANTS**, the real property situated in **North Yarmouth**, County of **Cumberland** and **State of Maine** more particularly described in Exhibit A attached hereto and incorporated herein by reference.

IN WITNESS WHEREOF, this instrument has been executed this 21st day of November, 2022.

Guidi Real Estate, LLC

Witness

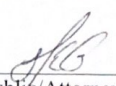


By: James P. Guidi, Sole Member

State of Maine
County of Cumberland, ss.

November 21, 2022

Personally appeared before me the above-named **James P. Guidi, Sole Member of Guidi Real Estate, LLC**, and acknowledged the foregoing instrument to be his free act and deed in his said capacity and the free act and deed of **Guidi Real Estate, LLC**.


Notary Public/Attorney at Law

KEVIN J. GERSPACH
MAINE BAR #6477

File Number 2022-1020