

PLANNING BOARD APPLICATION

OFFICE USE ONLY

PID:

Pre-Application Date:

Date Stamp:

NOTE: Please email a copy of your full submission binder to <u>Planner@boothbayharbor.org</u>. 8 hard copies shall be dropped off or mailed to the Town Office.

SITE DETAILS

Street Address	
Deed Book and Page	
Existing Subdivision Name	Not Applicable
Lot within subdivision	Not Applicable
Tax Map & Lot	
Zoning district	
Existing land use(s)	

PROPERTY OWNER INFORMATION

Property Owner Name Mailing Address	
Phone Number Email	

APPLICANT INFORMATION (IF DIFFERENT FROM ABOVE)

Applicant Name	
Mailing Address	
Phone Number	
Email	

CONTACT PERSON / AGENT INFORMATION

Staff will **only contact one designated person** regarding the application. Please identify the primary contact:

Property owner	Applicant	Other (fill out section below):	
Applicant Name			
Mailing Address			
Phone Number			
Email			

PROJECT INFORMATION

Project Description

Is the project located within any of the following? (Please select all that apply):

- Special Flood Hazard Area
- Urban Impaired Stream Watershed
- Shoreland Zoning Area
- Designated Historic Resource

APPLICATION TYPE

Please select **ALL** that apply:

- Pre-Application
- Site Plan (land disturbance only)
- Site Plan (with building)
- Shoreland Permit
- Zoning Map Amendment

- Minor Subdivision
- Preliminary Major Subdivision
- Final Major Subdivision
- Conditional Use
- Zoning Text Amendment

SIGNATURES

PROPERTY OWNER'S CONSENT REQUIRED:

I declare under penalty of perjury that I am the owner of said property. I certify that all of the submitted information is true and correct to the best of my knowledge and belief. I understand that any misrepresentation of submitted data may invalidate any approval of this application.

Signature of Property Owner

Date



I, _____, authorize the applicant or agent named on this application to file this application.

APPLICANT / AGENT CERTIFICATION:

I certify that all of the information provided within this application form and accompanying materials is true and accurate to the best of my knowledge. I understand that any misrepresentation of submitted data may invalidate any approval of this application.

Signature of Applicant

Print Name and Title

Date