

# **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