



**Community Development  
Planning Division**

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GORHAM MUNICIPAL CENTER, 75 South Street, Gorham, ME 04038

Tel: 207-222-1620

<b>Application: CONTRACT ZONING</b>		<b>FEE FOR PLAN REVIEW</b>		<b>NEW APPLICATION</b>		<input type="checkbox"/> \$3,200.00 <input type="checkbox"/> \$200 Public Notice/Legal Ad Fee		<b>Amount Paid \$</b> _____	
				<b>AMENDMENT TO AN AGREEMENT</b>		<input type="checkbox"/> \$750.00 <input type="checkbox"/> \$200 Public Notice/Legal Ad Fee		<b>Date Paid:</b> _____	
<b>PROPERTY DESCRIPTION</b>	<b>Parcel ID</b>	<b>Map(s)</b>		<b>Lot(s)</b>		<b>Zoning District(s)</b>		<b>Total Land Area (sq.ft.)</b>	
	<b>Physical Address/ Location</b>								
<b>APPLICANT(S) INFORMATION (required)</b>	<b>Name(s)</b>					<b>Mailing Address</b>			
	<b>Phone</b>								
	<b>Email</b>								
<b>PROPERTY OWNER'S INFORMATION (required)</b>	<b>Name(s)</b>					<b>Mailing Address</b>			
	<b>Phone</b>								
	<b>Email</b>								
<b>APPLICANT'S AGENT INFORMATION</b>	<b>Name</b>					<b>Name of Business</b>			
	<b>Phone</b>					<b>Mailing Address</b>			
	<b>Email</b>								
<b>PROPERTY DESCRIPTION</b>	<b>Explain the need for Contract Zoning and describe all other associated applications:</b>								

The original signed copy of this form must be accompanied by the required application fee, required number of application forms, plans, and other necessary submissions.  
 (1 copy of original application/etc., 1 electronic copy, 8 reduced size (11x17) plans, 7 full size (24x36) plans)

Check All That Apply		THE FOLLOWING QUESTIONS MAY APPLY. (Answer Yes/No or comment Does Not Apply).	Explain or comment as needed for clarification
YES	NO		
<input type="checkbox"/>	<input type="checkbox"/>	Attached are copies of: current deed to the property, contract to purchase or lease or other form of 'Right, Title and/or Interest' in the property.	
<input type="checkbox"/>	<input type="checkbox"/>	Does the owner hold any interest in abutting or contiguous property? If yes, please explain:	
<input type="checkbox"/>	<input type="checkbox"/>	Is a variance from the Zoning Board of Appeals required? If yes, please describe:	

**ADDITIONAL COMMENTS:**

*The undersigned hereby makes application to the Town of Gorham for approval of the proposed project and declares the foregoing to be true and accurate to the best of his/her knowledge.*

\_\_\_\_\_  
 APPLICANT (or APPLICANT'S AGENT) SIGNATURE

\_\_\_\_\_  
 DATE

\_\_\_\_\_  
 PRINT NAME

# AGENT AUTHORIZATION

<b>PROPERTY DESCRIPTION</b>	<b>PHYSICAL ADDRESS/ LOCATION</b>		<b>MAP(S)</b>	
			<b>LOT(S)</b>	
<b>APPLICANT(S) INFORMATION</b>	<b>NAME(S)</b>		<b>MAILING ADDRESS</b>	
	<b>PHONE</b>			
	<b>EMAIL</b>			
<b>OWNER(S) INFORMATION</b>	<b>NAME(S)</b>		<b>MAILING ADDRESS</b>	
	<b>PHONE</b>			
	<b>EMAIL</b>			
<b>APPLICANT'S AGENT INFORMATION</b>	<b>NAME</b>		<b>BUSINESS NAME</b>	
	<b>PHONE</b>		<b>MAILING ADDRESS</b>	
	<b>EMAIL</b>			

*Said agent(s) may represent me/us before Gorham Town officers and the Gorham Planning Board to expedite and complete the approval of the proposed development for this parcel.*

\_\_\_\_\_  
**APPLICANT SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
 PLEASE TYPE OR PRINT NAME HERE

\_\_\_\_\_  
**CO-APPLICANT SIGNATURE (if applicable)**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
 PLEASE TYPE OR PRINT NAME HERE

\_\_\_\_\_  
**APPLICANT'S AGENT SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
 PLEASE TYPE OR PRINT NAME HERE