



Community Development Planning Division

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

Tel: 207-222-1620

SHORELAND ZONING PERMIT APPLICATION		FEE FOR PLAN REVIEW		<input type="checkbox"/> \$200 Application Fee <input type="checkbox"/> \$100 Public Notice/Legal Ad		Amount Paid: \$ _____ Date Paid: _____
PROPERTY DESCRIPTION	Parcel ID	Map(s)	Lot(s)	Block	Zoning District(s)	Total Land Area (sq.ft.)
	Physical Address/ Location					
APPLICANT'S INFORMATION	Name(s)			Mailing Address		
	Phone					
	Email					
PROPERTY OWNER'S INFORMATION	Name(s)			Mailing Address		
	Email					
	Phone					
APPLICANT'S AGENT INFORMATION	Name			Name of Business		
	Phone			Mailing Address		
	Email					
Chapter 2 Section 2-1 Subsection E. 10) Administration. a) Shoreland Zoning Approval Required						
The proposed development lies within the following shoreland zoning districts: (check all that apply)						
<input type="checkbox"/> Shoreland Overlay District <input type="checkbox"/> Resource Protection District <input type="checkbox"/> Stream Protection District						
YES	NO	If the answer is yes, please explain.				Comment
<input type="checkbox"/>	<input type="checkbox"/>	Is this application being submitted in conjunction with a proposed improvement and or project that is before the Planning Board, and/or the Board of Appeals?				
<input type="checkbox"/>	<input type="checkbox"/>	The proposed use lies within the Shoreland Overlay District and includes the RP and SP sub districts. [Ch. 2 Sec 2-1 Subsection E.7. a) for permitted uses.]				
<input type="checkbox"/>	<input type="checkbox"/>	The proposed use is permitted in the Resource Protection sub district. [Ch. 2 Sec 2-1 Subsection E.8. a) for permitted uses.]				
<input type="checkbox"/>	<input type="checkbox"/>	The proposed use is permitted in the Stream Protection sub district. [Ch. 2 Sec 2-1 Subsection E.8) b) for permitted uses.]				

<input type="checkbox"/>	<input type="checkbox"/>	Copies of documents that show 'Right, Title and/or Interest' in the property are attached.	
<input type="checkbox"/>	<input type="checkbox"/>	Does the Owner/Applicant hold any interest in abutting or contiguous property? If yes, please explain:	
<input type="checkbox"/>	<input type="checkbox"/>	Is a variance from the Board of Appeals (BOD) required? If yes, please attach a copy of the Zoning Variance application or a copy of the Decision Document if the BOD has granted/denied a Zoning Variance request.	

The proposed use or uses must be in conformance with the Shoreland Zoning Land Use Performance Standards. [See Chapter 2 Section 2-1, Subsection E. 8) for Land Uses in the Shoreland Overlay District.]

All land use activities within the Shoreland Overlay District must conform to the following standards. Check Yes for all applicable standards, and submit sufficient maps, documents, State and local approvals that demonstrate the required performance standards are met and/or will be met.

YES	NO	Minimum Lot Standards
<input type="checkbox"/>	<input type="checkbox"/>	Principal and Accessory Building Structures
<input type="checkbox"/>	<input type="checkbox"/>	Piers, Docks, Wharves, Bridges and Other Structures and Bases Extending Over or below the Normal
<input type="checkbox"/>	<input type="checkbox"/>	High-Water line of a Water Body or Within a Wetland
<input type="checkbox"/>	<input type="checkbox"/>	Signs
<input type="checkbox"/>	<input type="checkbox"/>	Stormwater Runoff
<input type="checkbox"/>	<input type="checkbox"/>	Septic Waste Disposal
<input type="checkbox"/>	<input type="checkbox"/>	Essential Services
<input type="checkbox"/>	<input type="checkbox"/>	Gravel Pits
<input type="checkbox"/>	<input type="checkbox"/>	Agriculture
<input type="checkbox"/>	<input type="checkbox"/>	Timber Harvesting
<input type="checkbox"/>	<input type="checkbox"/>	Clearing or Removal of Vegetation for Activities Other Than Timber Harvesting
<input type="checkbox"/>	<input type="checkbox"/>	Erosion and Sedimentation Control
<input type="checkbox"/>	<input type="checkbox"/>	Soils
<input type="checkbox"/>	<input type="checkbox"/>	Water Quality
<input type="checkbox"/>	<input type="checkbox"/>	Archeological Sites

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 AGENT'S SIGNATURE

DATE

PLEASE TYPE OR PRINT NAME

AGENT AUTHORIZATION

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

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