Dear Applicant:

Enclosed is the application for a conditional use permit. Please fill this out and return it to this office at least 14-days prior to the next scheduled meeting. Because of office hour cut backs if my office is closed you may leave the information with any of the employees upstairs and they will see that I receive it. The planning board holds regular meetings on the third Wednesday of the month, workshops on the first Wednesday of the month, and additional meetings or public hearings as needed.

Include with your application attach a check in the sum of $250.00 made payable to the Town of Limerick, this amount is non-refundable and should be the final amount due for your permit unless expenses become far higher than the normal expenses incurred for the average permit.

The abutter information can be found on the table in the upstairs hallway; there you will find your map and lot number as well as those of any abutters within 250 feet of your property. These abutters will be notified by mail of your impending application and the date of a site walk and the public hearing.

If I can further assist you in any way please do not hesitate to call me at the above number.

Sincerely,

Joanne L. Andrews

Planning Board Secretary
TOWN OF LIMERICK PLANNING BOARD
CONDITIONAL USE PERMIT APPLICATION

(DATE)

A Check Made Payable to The Town of Limerick for $250.00 Must Accompany This Application

APPLICANT INFORMATION

APPLICANT

Name: ___________________________________________ Name: ___________________________________________
Address: ___________________________________________ Address: ___________________________________________
______________________________________________________ __________________________________________________
E-mail: ___________________________________________ E-mail: ___________________________________________
Telephone: ________________________________________ Telephone: _______________________________________
Cell phone/pager: ___________________________________ Cell phone/pager: ________________________________

If applicant is a corporation, are you licensed in Maine? YES ______________ NO ____________
If yes, attach a copy of your State of Maine registration.

APPLICANT'S AUTHORIZED AGENT

Name: ___________________________________________
Address: _______________________________________
______________________________________________________
E-mail: ___________________________________________
Telephone: _______________________________________
Cell phone/pager: ________________________________

LAND SURVEYOR, ENGINEER OR OTHER

Name: ___________________________________________
Address: _______________________________________
______________________________________________________
E-mail: ___________________________________________
Telephone: _______________________________________
Cell phone/pager: ________________________________

Do you want correspondence relating to the Application sent to the agent? YES_____ No____

Registration Number: ________________________________

What legal interest does the applicant have in the property (ownership, option, purchase, etc.)?

________________________________________________________________________________________

What interest does the applicant have in any abutting properties?

________________________________________________________________________________________
LOCATION OF PROPERTY:

Limerick Tax Map Number: _______________________________ Lot Number: _______________________________

County Registry of Deeds - Book Number: _______________ Page(s) Number: __________________________

Property Address: ____________________________________________________________

Current Property Zoning as indicated on the Limerick Zoning Map: _______________________________

Total Acreage: _______________________________________________________________________

Acreage to be developed: _______________________________________________________________________

Indicate any restrictive covenants in the deeds (no business use, unregistered vehicles, etc.):

Identify the existing use(s) of property (farmland, woodlot, etc.):

Does the parcel include any water bodies? YES__________________ NO__________________

Does the parcel include any wetlands? YES__________________ NO__________________

Is any portion of the property within a special flood hazard area as identified by the Federal
Emergency Management Agency? YES__________________ NO__________________

Are there any notable items such as cemeteries, historical landmarks, etc. located on the
property? YES_______ NO_______. If yes, please list: ________________________________

Land Use as specified in Article V – District Regulations of the Limerick Zoning Ordinance:

Describe proposed land use: ____________________________________________________________

______________________________________________________________
List the information below for each parcel of property within 250' of your property. Note, this includes property located across any streets or roads:

1.) The map and lot numbers from the Town of Limerick tax maps.
2.) The property owner(s) full name(s).
3.) Complete mailing address.
LIMERICK ZONING ORDINANCE
ARTICLE VII — CONDITIONAL USES

Applicant requirements necessary for Planning Board approval of the proposed use are as described in the Limerick Zoning Ordinance:

B. The Planning Board may approve an application for a Conditional Use Permit if the applicant demonstrates that the proposed use:

1. Will meet the definition and specific requirements set forth in this ordinance for the specific use;
2. Will not have a significant detrimental effect on the use and peaceful enjoyment of adjacent or nearby property as a result of noise, vibrations, fumes, odor, dust, light, glare or other cause;
3. Will not have a significant adverse effect on adjacent or nearby property values;
4. Will not result in significant hazards to pedestrian or vehicular traffic or significant traffic congestion;
5. Will not result in significant fire danger;
6. Will not result in significant flood hazards or flood damage, drainage problems, ground or surface water contamination, or soil erosion;
7. Will not create a safety hazard because of inadequate access to the site, or to the buildings on the site, for emergency vehicles;
8. Has proposed exterior lighting which will not create hazards to motorists traveling on adjacent public streets, is adequate to the safety of occupants or users of the site, will not damage the value and diminish the usability of adjacent properties;
9. Makes provisions for buffers and on-site landscaping which provide adequate protection to neighboring properties from detrimental features of the development;
10. Makes provisions for vehicular loading and unloading and parking and for vehicular and pedestrian circulation on the site and onto adjacent public streets which neither create hazards to safety nor impose significant burdens on public facilities;
11. Makes adequate provision for disposal of waste water or solid waste and for the prevention of ground or surface water contamination;
12. Makes adequate provision to control erosion or sedimentation;
13. Makes adequate provision to handle storm water run-off and other drainage problems on the site;
14. Provides for a water supply which will meet the demands of the proposed use;
15. Makes adequate provision for the transportation, storage and disposal of hazardous substances and materials as defined by State law;
16. Will not have an adverse impact on significant scenic vistas or on significant wildlife habitat, which could be avoided by reasonable modification of the plan.

On a separate sheet, please indicate how you intend to satisfy each condition and submit this information with your application.

To the best of my knowledge, all the stated information submitted in this application is complete, factual, and correct.

____________________________________________________
Signature of applicant, owner or representative

____________________________________________________
Date