## TOWN OF FARMINGTON AFTER-THE-FACT Site Review Check-Off and Notice

<ol> <li>Submitted a detailed description of the project.</li> </ol>	
2. □ Submitted a detailed sketch or site plan of the project.	
3. $\square$ Answered all applicable questions, signed and dated the appli	ication.
4. ☐ Enclosed a \$100.00 filing fee with application.	
NOTICE TO AFTER-THE-FACT SITE REVIEW	/ APPLICANTS
An "After-the-Fact" (ATF) application must be filed with the Coproject which has commenced before receiving approval and cease immediately.	
Applications must be submitted to the Code/Planning Office by not scheduled Planning Board meeting. Late submittals will be placed For some projects, the Planning Board may require a site visit and	on the following month's agenda.
This application is scheduled for Planning Board review onproviding the application is complete and all fees paid. The agendan invoice for all additional fees listed below.	a will be mailed to you along with
Applicants will be responsible for reimbursing the Code/Planning Cnewspaper ads. All abutting property owners to the subject propert across a public way, will be notified by the Code/Planning Office of Certified Mail. Please mail checks to: Town of Farmington, ATTN. Farmington Falls Road, Farmington, ME 04938.	y, and owners of properties directly the application proposal via
It is required that the applicant, or a representative for the project, Board meeting to answer any questions that the Board, abutters, o are held at 6:00 P.M. in the downstairs training room at the Municip Farmington Falls Road, Farmington, Maine 04938.	r the public may have. Meetings
FAILURE TO MEET THE ABOVE REQUIREMENTS MAY RESUL	T IN PERMIT DENIAL.
I have read and understand the above notice.	
Applicant's Signature	Date

## TOWN OF FARMINGTON AFTER-THE-FACT - Site Review Application

Application Date:	Application Number:	SR
APPLICANT INFORMATION		
Name of Applicant:		
Address:		
Telephone:		
Email Address:		
Location of <b>Project/</b> Property (street/road):		
Tax Map: Lot: Zoning District:		
Description of Project: (attach additional sheets if	necessary):	
Anticipated date for project commencement:		
Anticipated date for project completion:		
Name of Property Owner: (if different from above)	:	
Address:		
Telephone:		
Email Address:		
Name of Authorized Agent (if applicable):		
Address:		
Telephone:		
Email Address:		
☐ Attach statement designating agent(s) if applicab	ole.	

Name of Land Surveyor, Engineer, Architect or others preparing plan (if applicable):				
Address:				
Telephone: Registration number and seal:				
Email Address:				
If applicable, enclose perimeter survey of the parcel, made and certified by a registered land surveyor licensed in the State of Maine, relating to reference points showing true North point, graphic scale, corners of parcel, date of survey and total acreage.				
Person and address to which all correspondence regarding this application should be sent:				
LAND INFORMATION				
Please attach sheet showing the location of the site within town, and the structure's footprint and dimensions.				
Are there any deed restrictions, conditions or liens associated with this property? Yes / No. If yes, please attach the information.				
Is the site in an area with Overlay Zoning? Yes / No If yes, specify:				
Total acres in the parcel: Owned: Leased: Optioned:				
Number of acres included in the project:				
Is this property within the Wellhead Protection Zone? Yes No				
What is the existing use of the land site? (farmland, woodlot, commercial, etc.)				
Does the parcel include any water bodies? Yes / No				
Is any portion of the property within 250 feet of the high water mark of a pond or river? Yes / No				
Within 250 feet of the upland edge of a wetland? Yes / No				
Within 75 feet of a perennial stream? Yes / No				
Is any portion of the property within a special flood hazard area as identified by the Federal Emergency Management Agency? Yes/No				

Does this developm If yes, please indica	•	of public infrastructure	e? Yes / No
Roads	Sidewalks	Sewer Lines _	Street Lights
Storm Drainage	Water	Lines	Fire Protection Equipment
Other			
Identify method of v	water supply to propos	sed site: Well	Public
Identify method sev	vage disposal to propo	osed site:	
Septic tank	Public sewer	_ (Check with sewer c	lerk regarding sewer hook-up fees)
Are there other federal If yes, please attack		mits or approvals requi	ired? Yes / No
Identify the manner	in which police and fi	re service vehicles (in e	emergency) will access site:
State the estimated	I average number of v	ehicles per day anticipa	ated on or using this site:
	f parking spaces requ se parking plan layout.		t:
Note: For ADA (An	nericans with Disabiliti	es Act) requirements, o	contact the Code/Planning Office.
If applicable, state t	the hours and days of	operation:	
project. Include the	e type, and width of roa		rking system within the proposed bads, number of lanes, parking areas ion schedule.

- The Code/Planning Office will notify the following Department Heads, and request a letter of their review stating whether the proposed project is adequately designed for traffic safety and the handling of emergency vehicles: Fire Rescue Chief, Police Chief, and Public Works Director.
- The Code/Planning Office shall notify the Town Manager and request their review and recommendations.
- The Town's Code Enforcement Officer shall submit a letter stating whether the applicant is known to be in violation of any Town Ordinance regulating land use on the subject parcel.
- If applicable, the Wastewater Treatment Facility Superintendent will assess the impact of the project and determine whether it will cause an unreasonable burden on the municipal sewer system, and submit a letter of findings.

If applicable, the application shall be reviewed for accessibility compliance with the Americans with Disabilities Act (ADA).

Include all pertinent information as required in the Site Review Ordinance Performance Standards. Attach additional sheets as necessary.

Applicants shall submit ten sets of the application, site plans, maps, and any applicable supplemental information to the Code/Planning Office along with the required fee.

By signing below, the applicant for Site Review approval acknowledges that they are submitting a complete application.

Signature of Applicant

Date

Date