Town of Whitefield



36 Townhouse Road Whitefield, ME 04353 Phone 207-549-5175 Fax 207-549-3231

Application for Automobile Graveyard and /or Junkyard Permit

(To be submitted with \$50 permit fee & \$20 advertising fee payable to Town of Whitefield)

To the Town of Whitefield, Lincoln County Maine

I/We _______ hereby make application (in quadruplicate) for a permit to establish, operate or maintain an Automobile Graveyard and/or Junkyard at the following described location and in accordance with the Title 30-A, MRS Sections 3751 to 3760.

Answer all questions in full.

1. Give physical location of Automobile Graveyard and/or Junkyard.

2. Is this application made by or for a Company, Partnership, Corporation or Individual?

3. Is this property leased? Yes or No Property owned by				
Owner Address:				
4.How is "yard" screened?				
Fence? (Type/Height) Trees? (Type(s))				
Berm?Gully?HillOther?				
5. How far is the edge of the "yard" from center of highway? Feet.				
6. Can junk be seen from any part of highway? Yes No				
7. Is any portion of this "yard" on public property? Yes No				
8. Is "yard" within 300 feet of a Public Park, Public Playground, Public Bathing Beach, School,				
Church or Cemetery? Yes No				
9. When was "yard" established By whom?				
10. When was last permit issued? To whom				

State Storm Water Requirements

11. Have you filed a notice of intent with the Department of Environmental Protection to comply with the general permit provision for storm water discharges? Circle one: Yes _____ No _____

12. If no, you must attach a letter from the Department of Environmental Protection determining that a storm water discharge permit is not required.

The undersigned certifies that the above information is true and correct to the best of his/her knowledge and that he/she is the owner or agent of the property or that he/she has been duly authorized to make this application and to receive the permit under the law.

Signed by:	
For: N	ame of Company, Corporation, Partnership or Individual
Address:	
Phone #:	Email:

Make and attach a complete sketch of "yard." Show footage all sides and location in relationship to adjacent properties. Show distance (in feet) from edge of "yard" to center of highway. Fill the name of nearest Street in each direction. Distance from nearest intersection, bridge or other known reference point.

Indicate on the top of sketch the direction $_N_E_S_W$.

Tax Account Number	Tax Map/Lot Number
	14111140, 2001 (4111001

Other Identification _____

Select Board use only:

Application Received	Date of Hearing	
Time of Hearing		Permit No
Place of Hearing		Fee Paid \$
Notifications sent by		Date