

Town of Bowdoinham

E911 Addressing Application

APPLICANT INFORMATION:

Applicant's Name:					
					_
Owner's Name:			Phone:		
Owner's Mailing Addr	ess:		Email:	Email:	
PROPERTY INFORMA	TION:				
Tax Map and Lot Number:		Current Property Address:			
Road Ownership:	Town	Private	Private Subdivision	State	
Note: Property owner	s and applicants requestin	g an address for a State Ro	ad should contact the Department	t of Transportation	
Proposed Use:	Single Family	Multi-Family	Accessory Dwelling Unit		
	Commercial	Institutional	Industrial		
Note: A separate E91	1 Addressing Application n	nust be submitted for each	individual structure and/or dwellir	ng unit	
Driveway/Entrance (<i>New/Existing</i>):		Driveway Ins	Driveway Installed (Y/N): Mailbox Installed (Y/N):		

I certify that I have read and completely understand the application; I certify that the information contained in this

application and its attachments are true and correct; I understand that all documentation provided on this form, and all other documents submitted as part of my proposal are a matter of public record; I understand that copies of this information may be supplied upon request to an interested party:

Applicant's Signature Print Name Date FOR OFFICE USE ONLY Date Received: ______ Received By: ______ CEO/LPI Signature: _____ Date Approved: ______

13 School Street, Bowdoinham, ME 04008 • www.bowdoinham.com Phone 666-5531 • Fax 666-5532 • ceo@bowdoinham.com