



TOWN OF TOPSHAM PLANNING OFFICE

100 Main Street, Second Floor
Topsham, Maine 04086

Phone: (207) 725-1724 • Fax: (207) 725-1737

SITE PLAN REVIEW APPLICATION

(Note: All performance standards must be addressed. Waivers may not be granted by staff.)

		NEW CONSTRUCTION	AMENDMENTS		Amount Paid	Date Paid
	FEES FOR SITE PLAN REVIEW	Staff Review	<input type="checkbox"/> \$0.10/s. f. of new building footprint area <input type="checkbox"/> \$0.01/s. f. of new impervious area (parking, etc.)	Minimum fee of \$250 or ½ the cost of an application fee as calculated to the left.		\$
Planning Board Review		<input type="checkbox"/> \$0.10/s. f. of new building footprint area <input type="checkbox"/> \$0.01/s. f. of new impervious area (parking, etc.)	Minimum fee of \$350 or ½ the cost of an application fee as calculated to the left.		\$	
PROPERTY DESCRIPTION	Parcel ID	Map/Lot #(s)	Zoning District		Total Land Area (acres)	
	Physical Address					
PROPERTY OWNER(S) INFORMATION	Name		Mailing Address			
	Phone					
	Fax					
	Email					
	Fax					
	Email					
APPLICANT(S) AGENT'S INFORMATION (Please submit agent authorization form.)	Name		Name of Business			
	Phone		Mailing Address			
	Fax					
	Email					
Existing Use:						

As revised July 10, 2018

PROJECT DESCRIPTION	
	Proposed Use: Please describe in detail all changes to the current use of the property, any renovations to be made to existing buildings and any proposed new structure. (Attach a separate sheet if more space is needed.)

THE ORIGINAL SIGNED COPY OF THIS FORM MUST BE ACCOMPANIED BY THE REQUIRED APPLICATION AND ESCROW FEES, REQUIRED NUMBER OF APPLICATION FORMS, PLANS, AND OTHER NECESSARY SUBMISSIONS, AS OUTLINED IN THE CHECKLIST BELOW.

Note:

1. Submittals that the town planner deems sufficiently lacking in content will not be scheduled for review.
2. It is the responsibility of the applicant to present a clear understanding of the project.
3. The written materials and plans must be organized and contained in a single collated report and folded. Rolled plans will not be accepted.
4. The application and escrow fees are required at time of submission.

SITE PLAN REVIEW CHECKLIST

(See Chapter 175)

Please Check Yes or No	PLEASE ANSWER THE FOLLOWING:	List Plan Sheet or page, Explain or comment as needed for clarification
	<input type="checkbox"/> 9 Paper Copies of the entire Plan Packet [nine (9) of written materials, four (4) - 24 "x 36" plan sets plus five (5) - 11" x 17" plan sets] <input type="checkbox"/> ONE (1) Electronic copy (via thumb drive/USB; email submissions will not be accepted) <input type="checkbox"/> Self-addressed stamped envelope to mail thumb drive back to applicant. <input type="checkbox"/> Waiver form, signed, if needed <input type="checkbox"/> Agent Authorization form, signed <input type="checkbox"/> Peer Review Engineering Escrow <input type="checkbox"/> Traffic Impact Fee, if in Topsham Fair Mall (See Chapter 199)	
YES	NO	THE PROPOSED PROJECT INCLUDES THE FOLLOWING:
<input type="checkbox"/>	<input type="checkbox"/>	Map at a scale of not less than 1 inch to 100 feet that conforms to 175 - 5 A.
<input type="checkbox"/>	<input type="checkbox"/>	Written statement that conforms to 175 - 5 B.
<input type="checkbox"/>	<input type="checkbox"/>	Change of use to existing structure
<input type="checkbox"/>	<input type="checkbox"/>	New ground disturbance of five thousand (5,000) or fewer square feet
<input type="checkbox"/>	<input type="checkbox"/>	Architectural changes to existing buildings (Must meet both Chapter 175-10 and 175 - 11
<input type="checkbox"/>	<input type="checkbox"/>	Is this application an amendment to an approved Site Plan? If so, please provide the name of the approved plan and date of approval in the box to the right.
<input type="checkbox"/>	<input type="checkbox"/>	A sketch plan pre-application meeting with the Planning Board is required for new developments. What was the date of that meeting? Please write it in the box to the right.
<input type="checkbox"/>	<input type="checkbox"/>	Attached are copies of most recent Deed, documents showing 'Right, Title and/or Interest' in the property, or Contract to Purchase or Option to Lease the property.
<input type="checkbox"/>	<input type="checkbox"/>	Does the owner hold any interest in abutting or contiguous property? If yes, please explain in an attachment.
<input type="checkbox"/>	<input type="checkbox"/>	Identify any and all easements on the property. Attach copies of all easement deeds.
<input type="checkbox"/>	<input type="checkbox"/>	Are there any waivers or variances with the property? Attach existing plan listing them.
<input type="checkbox"/>	<input type="checkbox"/>	Are you requesting waivers from the Planning Board? Please submit the waiver application with this application.
<input type="checkbox"/>	<input type="checkbox"/>	Are/did you requesting/receive a variance from the Board of Appeals? Please submit the variance decision with this application.

As revised July 10, 2018

<input type="checkbox"/>	<input type="checkbox"/>	Are you applying for or amending a conditional use permit? Please submit the conditional use permit application with this application.	
YES	NO	DIMENSIONS: Please attach calculations and/or plans, as applicable, that show construction details for the following, Parking Area(s), Constructions Notes, Final Grades, Drainage, Etc.	
<input type="checkbox"/>	<input type="checkbox"/>	Existing Footprint of structure(s) is:	sq. ft.
<input type="checkbox"/>	<input type="checkbox"/>	Proposed Footprint of new structure(s) is:	sq. ft.
<input type="checkbox"/>	<input type="checkbox"/>	Existing Building height is (are):	feet
<input type="checkbox"/>	<input type="checkbox"/>	Proposed Building height is (are):	feet
<input type="checkbox"/>	<input type="checkbox"/>	Existing open space ratio :	
<input type="checkbox"/>	<input type="checkbox"/>	Proposed open space ratio :	
<input type="checkbox"/>	<input type="checkbox"/>	Existing floor area ratio:	
<input type="checkbox"/>	<input type="checkbox"/>	Proposed floor area ratio	
YES	NO	PRESERVES AND ENHANCES LANDSCAPING: Chapter 175 - 8 A	
<input type="checkbox"/>	<input type="checkbox"/>	Landscaping plan shows existing and proposed vegetation conforming to 175-10	
<input type="checkbox"/>	<input type="checkbox"/>	Maine registered landscape architect has sealed landscaping plan	
<input type="checkbox"/>	<input type="checkbox"/>	If this project is an amendment to an existing site plan and does not require compliance with 175-10 E(3), do you have a letter from a Maine registered landscape architect stating that the existing landscaping is still compliant with the original landscaping plan?	
YES	NO	RELATIONSHIP OF BUILDINGS TO ENVIRONMENT: Chapter 175 - 8 B	
<input type="checkbox"/>	<input type="checkbox"/>	Architectural plan shows existing and proposed buildings conforming to 175-11	
<input type="checkbox"/>	<input type="checkbox"/>	Is the architectural plans signed by a Maine registered architect or engineer	
YES	NO	VEHICULAR ACCESS: Chapter 175 - 8 C	
<input type="checkbox"/>	<input type="checkbox"/>	Site plan shows access and egress locations	
YES	NO	TRAFFIC IMPACT (ATTACH SEPARATE STUDY, IF NECESSARY)	
<input type="checkbox"/>	<input type="checkbox"/>	Estimate the number of vehicle trips entering and leaving the site on a daily basis.	entering; exiting
<input type="checkbox"/>	<input type="checkbox"/>	Estimate the number of vehicles entering and leaving the site during the busiest a.m. hour:	entering; exiting The busiest a.m. hour falls between a.m. and a.m.
<input type="checkbox"/>	<input type="checkbox"/>	Estimate the number of vehicles entering and leaving the site during the busiest p.m. hour:	entering; exiting The busiest p.m. hour falls between a.m. and p.m.

<input type="checkbox"/>	<input type="checkbox"/>	Will there be delivery truck service? If so indicate the following: size, number, type and frequency of delivery and service vehicles:	The size is _____ feet wide and _____ feet long; The number is _____; the type is _____ and the frequency is _____ trips per day.
YES	NO	PARKING and CIRCULATION: Chapter 175 - 8 D And 175-12	
<input type="checkbox"/>	<input type="checkbox"/>	Parking plan shows existing and proposed parking conforming to 175 -18 D and 175-12	
<input type="checkbox"/>	<input type="checkbox"/>	Total number of parking spaces required under the Zoning Ordinance Chapter 225-27	
<input type="checkbox"/>	<input type="checkbox"/>	Number of existing parking spaces:	
<input type="checkbox"/>	<input type="checkbox"/>	Estimated number of parking spaces required by proposed use is:	
<input type="checkbox"/>	<input type="checkbox"/>	Existing paved area is:	sq ft.
<input type="checkbox"/>	<input type="checkbox"/>	Proposed new paved area is:	sq ft.
<input type="checkbox"/>	<input type="checkbox"/>	Number of proposed new parking spaces	
<input type="checkbox"/>	<input type="checkbox"/>	Size of spaces: (ex. 9' x 18')	ft X ft
<input type="checkbox"/>	<input type="checkbox"/>	Width of maneuvering aisles	ft
YES	NO	SURFACE WATER DRAINAGE: Chapter 175-8 E	
<input type="checkbox"/>	<input type="checkbox"/>	Stormwater plan conforms to Chapter 175-8 E	
YES	NO	UTILITIES, WATER NEEDS, SEWER: Chapter 175-8F, N, O, AND Q	
<input type="checkbox"/>	<input type="checkbox"/>	Public Sewer: Attach a letter from the Sewer District that verifies that public sewer can be connected to, and that the existing system has available capacity.	The estimated gallons per day is _____ gpd.
<input type="checkbox"/>	<input type="checkbox"/>	Septic System: Subsurface waste disposal. Attach a copy of the HHE 200 Report.	
<input type="checkbox"/>	<input type="checkbox"/>	Public Water: Attach a letter from the Water District that verifies the site can be served for the foreseeable future and that the proposed water plan meets or exceeds design requirements of the Water District.	
<input type="checkbox"/>	<input type="checkbox"/>	Potable water will be provided by an on-site well. Attach letter from well driller stating water is available.	
<input type="checkbox"/>	<input type="checkbox"/>	Fire Protection: Attach a letter from the Town of Topsham Fire Chief that verifies all design requirements for fire service and/or fire protection are satisfactory.	
		Utilities will be: <input type="checkbox"/> Underground <input type="checkbox"/> Overhead.	
		Power will be: <input type="checkbox"/> Single Phase <input type="checkbox"/> 2 Phase <input type="checkbox"/> 3 Phase	
		Who is the Natural Gas provider?	
		Who is the private hauler for Trash Pick-up?	
<input type="checkbox"/>	<input type="checkbox"/>	Will the proposed use produce and/or involve the use of hazardous waste materials? If so, list all hazardous materials to be used and/or fabricated on site. Provide the name of the disposal company and attach copies of agreements.	

YES	NO	ADVERTISING FEATURES (SIGNAGE): Chapter 175-8G	
<input type="checkbox"/>	<input type="checkbox"/>	Are there existing signs on-site? If so, how many are there and what is the total sign area in square feet?	existing signs totaling sq. ft.
<input type="checkbox"/>	<input type="checkbox"/>	Is there proposed new signage? If so, please fill out the Sign Application Packet and include with this packet.	
YES	NO	SPECIAL FEATURES: Chapter 175-8H	
<input type="checkbox"/>	<input type="checkbox"/>	Are there exposed storage areas, machinery, service areas, truck loading areas, utility buildings and similar buildings? If so, please show on site plan with setbacks and screening.	
YES	NO	EXTERIOR LIGHTING: Chapter 175-8I	
<input type="checkbox"/>	<input type="checkbox"/>	Does the exterior lighting plan conform to 175-9?	
<input type="checkbox"/>	<input type="checkbox"/>	Does the lighting comply with the Illuminating Engineering Society of North America (IESNA) standards	
YES	NO	EMERGENCY VEHICLE ACCESS: Chapter 175-8J	
<input type="checkbox"/>	<input type="checkbox"/>	Does the site plan provide for convenient and safe emergency vehicle access?	
YES	NO	MUNICIPAL SERVICES: Chapter 175-8K	
<input type="checkbox"/>	<input type="checkbox"/>	Does the development impact municipal roads, Fire Department, Police Department, solid waste program, sewerage treatment plant, schools, open spaces, recreational programs and facilities and other services and facilities? If so, please explain how.	
YES	NO	WATER POLLUTION: Chapter 175-8L	
<input type="checkbox"/>	<input type="checkbox"/>	Will there be any undue water pollution based on the criteria listed in 175-8L? Please explain.	
YES	NO	AIR POLLUTION: Chapter 175-8M	
<input type="checkbox"/>	<input type="checkbox"/>	Will there be any undue water pollution based on the criteria listed in 175-8M? Please explain.	
YES	NO	EROSION: Chapter 175-8P	
<input type="checkbox"/>	<input type="checkbox"/>	Does the erosion control plan meet the requirements of this section?	
YES	NO	SHORELAND AREAS: Chapter 175-8S	
<input type="checkbox"/>	<input type="checkbox"/>	Is any part of the property within the Shoreland Overlay District or a flood hazard area that is subject to periodic flooding? If yes, explain.	
<input type="checkbox"/>	<input type="checkbox"/>	Are the 100 yr. Floodplain Zones and the Shoreland Zoning boundaries shown on the site plan?	
YES	NO	STORMWATER MANAGEMENT	
<input type="checkbox"/>	<input type="checkbox"/>	Will the construction activity disturb one acre or more?	
<input type="checkbox"/>	<input type="checkbox"/>	Is the project reviewed using Site Location Of Development Act (SLODA)?	

YES	NO	NATURAL BEAUTY, HISTORIC, ARCHEOLOGICAL, HABITAT, AND ENVIRONMENTAL IMPACT Chapter 175 -18 R	
<input type="checkbox"/>	<input type="checkbox"/>	Is this property an important historic, archeological or natural resource site, or adjacent to such a site? If yes, explain:	
YES	NO	GENERAL PERFORMANCE STANDARDS Chapter 225 Article VII	
<input type="checkbox"/>	<input type="checkbox"/>	Do you comply with the performance standards in Chapter 225 Article VII General Performance Standards	
YES	NO	STATE AND LOCAL PERMITS	
<input type="checkbox"/>	<input type="checkbox"/>	Is a Maine Department of Environmental Protection (MDEP) Permit required? If so, list the permit.	
<input type="checkbox"/>	<input type="checkbox"/>	Is an Army Corps of Engineers approval/permit required? If so, list the permit.	
<input type="checkbox"/>	<input type="checkbox"/>	Are there any State or Federal approval required? If so, list the approval.	
<input type="checkbox"/>	<input type="checkbox"/>	Are there any State or Federal Licenses/ Permits required? If so, list the license/permit.	
<input type="checkbox"/>	<input type="checkbox"/>	A Maine Construction General Permit (MCGP) is required where the area of disturbance is greater than one acre. Is an MCGP permit required?	
<input type="checkbox"/>	<input type="checkbox"/>	Is a variance from the Zoning Board of Appeals required? If yes, please describe:	
<input type="checkbox"/>	<input type="checkbox"/>	Is a waiver needed from the Planning Board? If yes, please include the waiver request application with the site plan application.	

The undersigned hereby makes application to the Town of Topsham for approval of the proposed project and declares the foregoing to be true and accurate to the best of his/her knowledge.

SIGNATURE: APPLICANT OR APPLICANT'S AGENT

DATE

PRINT NAME

AGENT AUTHORIZATION

APPLICANT(S)/ OWNER (S)	Name			
PROPERTY DESCRIPTION	Physical Address			Map
				Lot
APPLICANT'S AGENT INFORMATION	Name			
	Phone		Business Name & Mailing Address	
	Fax			
	Email			

Said agent(s) may represent me/us before Topsham Town officers and/or 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