## NOTICE OF INTENT TO COMPLY WITH MAINE CONSTRUCTION GENERAL DEPMIT

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PLEASE TYPE O	R PRINT IN E	BLACK INK ONLY						
	Contract Con							

	INT IN BLACK INK ONLY										
Name of Applicant (Owner):	Michael Lyne – Develo	Collaborative		Applica Addres	nt Mailing s:	100 Comm		ercial Street, Suite 414			
Town/City:	Portland		il if mlyne@		State:			Maine	Zip	041	
Daytime phone:	207-522-3055	Email i			dcmaine.	om	Nan	ne of	Code:	S. Greer- Pinkham &	
(with area code)		availab	able:				Agent:		Greer, Civil Engineers		
Project Location: (Town/City):	Portland, ME			Northi	ing:			UTM Ea	sting:		
Map #:				(if known) Lot #:		A046-A050,		(if know	/n) disturbed	50,000 - 6	
							A055 & K004 t of a larger pro				
Creating a common plan of development or sale?				No	X Pa	rt of a larg			Yes	No X	
	(ies) to which the distur	bed are	a drain	s, or	MS4:	Portland					
name municipality i Does site drain to a	n Impaired Waterbody (	CIS									
If so, give name:	. Impanou Waterbody (	٥,٠									
Detailed directions to	to site, including addres	s if	19	Elbby S	Street, Por	tland, ME: Ta	ake Fo	orest Ave to	Libby Stre	et. Drive a quarter mi	
	ect and its purpose:	-	This nr	oiect is	s the rom	oval of a n	ortio	n of the		driveway on r uilding and the	
					s the rem	Ovai Oi a p	ortio	on or the e	existing b	uilding and the	
removal, replacemen	t, and addition to the pave	ed parkir	ng area	ι.							
■ ALL: A check fee. You mu  ■ ALL: A U.S.C  ■ ALL: Drawing  ■ ALL: An ESC	s not being signed by th	de paya ng perm e Atlas & ity (site	ble to: itted to & Gaze plan).	"Trea deter	asurer, St mine the map with	ate of Mai fee. the projec	ne." et site	See DEP	fee scho	edule for correct	
☐ IF any constru & Wildlife.	uction activity will occur	in esse	ential h	nabitat,	, attach v	vritten app	rova	I from the	Dept. of	Inland Fisheries	
compliance with the	ne Departments of Envi general permit. I also opt by the Department,	unders	tand th	nat <i>this</i>	s permit	ess the pro is not val	ject <b>id u</b> i	site for th	e purpos	e of determining the Department of	
Signature of Applicant:	flomas )	leer					)ate:	10	3/17		
otification. No further	vas avecord of permit. So ropriate regional office. rauthorization by DEP wil rried out in violation of a	ne בו be issu ll	:P will s ied afte	send a er recei	copy to the	e Town Off e. Check w	ice a ith D	to the Mai s evidence	ne Dept. c	Dia na a siste of	
PFFICE USE ONLY	Ck.#	T			Staff		T	Staff			
OI #	FP	Date			Acc.						
	15. C				Date			Def. Date		After Photos	
										1 110100	