**COMPREHENSIVE PLAN SUBMITTAL FORM**

**Municipal Planning Assistance Program**
**Department of Agriculture, Conservation & Forestry**

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1. **Municipality**:

**Contact Person:**

**Title:**

**Address:**

**Phone:**

**Email:**

Place where comprehensive plan will be available for public inspection:

Address:

Hours:

1. **Certification**

I (we) certify that this comprehensive plan was prepared with the intent of complying with the Growth Management Act (30-A M.R.S.A. § 4312 - 4350.), that it includes all the applicable required elements of the Maine Comprehensive Plan Review Criteria Rule (07-105 CMR 208), and that it is true and accurate.

A paper or electronic copy of the plan has been sent to the following regional council for review and comment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Required Signatures:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
**Chief Elected Official Chairperson, Comprehensive Planning Committee**

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Printed/Typed Name Printed/Typed Name

Date: \_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

**Please be sure that your submission includes:**

* The completed and signed Comprehensive Plan Submittal Form (this form)
* The entire Comprehensive Plan must be submitted as a single Adobe Acrobat (.pdf). May be submitted via USB, web link, or email attachment.

**To be accepted for review, the submitted comprehensive plan must include:**

* A vision statement
* A summary of public participation demonstrating compliance with 30-A MRSA §4324
* A regional coordination program
* A future land use plan with associated map(s)
* An implementation section

Please submit materials to:

**tom.miragliuolo@maine.gov**

**and/or**

**abe.dailey@maine.gov**

**Department of Agriculture, Conservation & Forestry**

**Municipal Planning Assistance Program**

**18 Elkins Lane**

**22 State House Station**

**Augusta, Maine 04333-0022**