

#L- _____
ATS # _____
Fees Paid _____
Date Received _____

CONDITION COMPLIANCE APPLICATION

This form shall be used to comply with a condition(s) on an Order that require approval from the Board or Department of Environmental Protection (Department).

Current fee schedule information can be found by contacting the Department or on the Department's website at: <http://www.maine.gov/dep/feesched.pdf>. The fee schedule is updated every November 1. Fees are payable to "Treasurer, State of Maine", and **MUST** accompany the application.

Please type or print in black ink only

1. Name of Applicant:		5. Name of Agent:	
2. Applicant's Mailing Address:		6. Agent's Mailing Address:	
3. Applicant's Daytime Phone #:		7. Agent's Daytime Phone #:	
4. Applicant e-mail address (REQUIRED):		8. Agent e-mail address (REQUIRED):	
LOCATION OF ACTIVITY			
9. Name of Project:			
10. Name of Town where project is located:		11. County:	
REQUIRED INFORMATION			
12. Existing Department Order number:		13. Order condition number(s):	
14. Summary of the information being provided:			
15. Project Manager, if known:			

This completed application form, fee, and all supporting documents summarized above shall be sent to the appropriate Department Office in Augusta, Portland, or Bangor.

Department of Environmental Protection 17 State House Station Augusta, ME 04333 Tel: (207) 287-3901	Department of Environmental Protection 312 Canco Road Portland, ME 04103 Tel: (207) 822-6300	Department of Environmental Protection 106 Hogan Road Bangor, ME 04401 (207) 941-4570
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CERTIFICATIONS / SIGNATURES on PAGE 2

IMPORTANT: IF THE SIGNATURE BELOW IS NOT THE APPLICANT'S SIGNATURE, ATTACH LETTER OF AGENT AUTHORIZATION SIGNED BY THE APPLICANT.

By signing below, the applicant (or authorized agent), certifies that he or she has read and understood the following:

CERTIFICATIONS / SIGNATURES

"I certify under penalty of law that I have personally examined the information submitted in this document and all attachments thereto and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the information is true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment. I authorize the Department to enter the property that is the subject of this application, at reasonable hours, including buildings, structures or conveyances on the property, to determine the accuracy of any information provided herein.

Further, I hereby authorize the Department to send me an electronically signed decision on the license I am applying for with this application by e-mailing the decision to the electronic address located on the front page of this application (see #4 and #8)"

Signed: _____ Title: _____ Date: _____