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TOWN OF CAPE ELIZABETH  
Planning Board  
Workshop Application

Applicant Name Peter Weare

Email PLNR Weare @ Maine .ll. com Telephone 207 776 8109

Address 69 Beach Bluff Terrace Cape Elizabeth

Do you own the property? Yes  No

If not, do you have written permission from the owner? Yes \_\_\_ (please provide) No \_\_\_

Project Contact Person (one only):

Name Same as above Telephone \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Location of Project 69 Beach Bluff Terrace Map/Lot U-10 / 19-37

Project description: Building lot for single family home

Peter Weare  
Signature of Owner

12/19/18  
Date

Please return to the town planner, ACP Office, Town Hall  
maureen.omeara@capeelizabeth.org, 799-0115  
Planning Board workshop requests must be submitted at least 7 days before the workshop.