

**COMPREHENSIVE PLAN SUBMITTAL FORM**

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

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**I. Municipality:**

**Contact Person:**

**Title:**

**Address:**

**Phone:**

**Email:**

Place where comprehensive plan will be available for public inspection:

Address:

Hours:

**II. 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 of 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 planning organization for review and comment:

**Required Signatures:**

\_\_\_\_\_  
**Chief Elected Official**

\_\_\_\_\_  
**Chairperson, Comprehensive Planning Committee**

\_\_\_\_\_  
Printed/Typed Name

\_\_\_\_\_  
Printed/Typed Name

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

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

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

- The completed and signed Comprehensive Plan Submittal Form
- One paper copy of entire Comprehensive Plan, complete with all maps
- One digital copy of entire Comprehensive Plan, complete with all maps.

[The digital copy, preferably in the form of a single Adobe Acrobat (.pdf) or Microsoft Word (doc/.docx) file, may be submitted via CD, web link or email attachment.]

**Please contact us if a digital copy of the Plan cannot be provided.**

**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:

**Department of Agriculture, Conservation & Forestry  
Municipal Planning Assistance Program  
18 Elkins Lane  
22 State House Station  
Augusta, Maine 04333-0022**

**Email:  
tom.miragliuolo@maine.gov**