

Town of Arundel, Maine  
Street Name Request Form

Return to Addressing Officer, Wendy Lank  
upon completion . ga@arundelmaine.org

\_\_\_\_\_ Date Received

Contact Information:

\_\_\_\_\_ Initials

NAME: \_\_\_\_\_ PHONE # \_\_\_\_\_

(CURRENT) MAILING ADDRESS: \_\_\_\_\_

E-mail \_\_\_\_\_ Map \_\_\_\_\_ Lot \_\_\_\_\_

\_\_\_\_\_ Signature

\_\_\_\_\_ Date

Other Owners that access their property from this Private Right-of-Way: (Please submit more sheets if necessary)

Name	Map/Lot	Telephone #	Signature
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please provide a survey map or to-scale sketch of all the current driveways that are accessed from this private way.

1<sup>st</sup> Choice \_\_\_\_\_

Accepted  Rejected Reason: \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

Accepted  Rejected Reason: \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

Accepted  Rejected Reason: \_\_\_\_\_

Town of Arundel reserves the right of final road name approval

Office Use Only

E-911 Addressing Officer: \_\_\_\_\_

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

Comments \_\_\_\_\_

Public Works: \_\_\_\_\_

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

Comments \_\_\_\_\_

Fire/Rescue: \_\_\_\_\_

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

Comments \_\_\_\_\_

Final Approval Date: \_\_\_\_\_