

Town of Arundel

257 Limerick Road, Arundel, ME 04046 Tel: (207) 985-4201 Fax: (207) 985-7589

Dear Business Applicant,

The steps necessary to apply for registration of a home occupation or business in Arundel are as follows:

1. Complete the Business Registration Form and return to: James Nagle, CEO at the town office.
2. The CEO will take the appropriate steps based on your application. If approved, you will receive a signed copy of the Business Registration Form as well as a Certificate of Occupancy if applicable.
3. A Personal Property Declaration form will be sent to you annually in March from the Assessor's office to be completed and returned as well. All business owners are required to declare personal property used for the purposes of the business.

If your application is denied, there is an appeal process. The CEO may be contacted for more information.

If you have any questions in completing this application please contact the CEO, Monday-Thursday, 7AM-3:30PM. @ (207) 985-4201 ext. 107

MAP _____ LOT _____
PP _____

TOWN OF ARUNDEL BUSINESS REGISTRATION FORM

OWNER OF BUSINESS: _____

HOME ADDRESS: _____

DBA (DOING BUSINESS AS): _____

TYPE OF BUSINESS: _____

BUSINESS MAILING ADDRESS: _____

BUSINESS TEL: _____

HOME TEL: _____

BUSINESS LOCATION: _____
Road Name & Number

DATE/ YEAR BUSINESS ESTABLISHED IN ARUNDEL: _____

PLEASE CHECK APPROPRIATE ANSWER

NOTE: ALL SECTIONS NEED TO BE FILLED OUT AND ALL TOWN OFFICIAL SIGNATURES ARE REQUIRED BEFORE YOU CAN OPERATE A BUSINESS IN THE TOWN OF ARUNDEL.

DO YOU LEASE THIS PROPERTY? YES NO

IF YES, NAME & ADDRESS OF PROPERTY OWNER: _____

ARE YOU PRIMARILY IN RETAIL SALES? YES NO

IF YES, WHAT TYPE? _____

ARE YOU PRIMARILY IN WHOLESALE SALES? YES NO

IF YES, WHAT TYPE? _____

DO YOU SERVE FOOD? YES NO

DO YOU SERVE ALCOHOL? YES NO

IF YES, Liquor License needed.

DO YOU PROVIDE A SERVICE? YES NO

IF YES, WHAT TYPE? _____

DO YOU MANUFACTURE A PRODUCT? YES NO

IF YES, WHAT TYPE? _____

IF APPLICABLE, WHAT BUSINESS WAS PREVIOUSLY IN THIS LOCATION?

IS THERE ANY EQUIPMENT (FURNITURE, FIXTURES, TOOLS, COMPUTERS ,OFFICE EQUIPMENT, ETC. USED ON THE PREMISES TO SUPPORT THIS BUSINESS? YES NO

I certify that the above information is true and complete to the best of my knowledge.

_____ Date

_____ APPLICANT'S SIGNATURE

REMINDER: Permits are required from the Code Enforcement Officer prior to the change of use of any property, the construction, modification or expansion of a building, or the erection of a sign.
Inspectors: James Nagle, CEO Building/Plumbing/Zoning/Electrical **Mon-Thurs 7am-3:30pm 985-4201**

NOTICE FROM THE ASSESSOR: All business owners are required to declare personal property used for the purposes of their business. You may use your own list format or use one that will be supplied to you upon request. This list should be returned to the Assessor by April 1st. Any questions should be referred to Beth Newcombe at 985-4201. If possible, please attach such a list with this completed registration/approval form.

ONCE THIS FORM IS COMPLETED AND SIGNED BY TOWN OFFICIALS, PLEASE RETURN TO:

**TOWN OF ARUNDEL
257 LIMERICK RD.
ARUNDEL ME 04046 TEL. 985-4201 ----- FAX 985-7589**

For Town Office use only

CODE ENFORCEMENT OFFICER: _____ DATE _____ APPROVED
Signature/James Nagle,CEO REFERRED TO PLANNING BOARD
REFERRED TO STAFF REVIEW BOARD
DENIED
NOT APPLICABLE

CEO COMMENTS AND/OR CONDITIONS: _____

PLANNING BOARD REVIEW: _____ DATE _____ APPROVED
Signature/Tad Redway, Planner DENIED
NOT APPLICABLE

If Conditional Use Permit issued, list any conditions: _____

STAFF REVIEW BOARD: _____ DATE _____ APPROVED
Signature/Tad Redway, Planner DENIED
NOT APPLICABLE

If Conditional Use Permit was issued, list any conditions: _____
