



GRAVEL PITS AND QUARRIES ANNUAL REPORT
FOR CLASS A AND CLASS B EXCAVATIONS
TOWN OF GRAY MAINE

For Office Use Only
Received Date:
Received By:
Fee Amount: \$100.00

OWNER INFORMATION

Name:
Mailing Address:
Town: State: Zip:
Daytime Telephone number: Fax:
Email:

OPERATOR INFORMATION (IF DIFFERENT FROM OWNER)

Name:
Mailing Address:
Town: State: Zip:
Daytime Telephone number: Fax:
Email:

SITE INFORMATION

Street address of excavation or directions to site with landmarks and names of nearest street:

[Blank lines for site address]

Town of Gray Map/Lot number (000-000-000-000):

Area in acres of working excavation:

Total area in acres that is currently permitted for excavation:

Total area in acres that is "grandfathered":

Total area in acres that has been excavated:

Total area in acres that has been reclaimed:

Estimate of when the total area that is expected to be excavated will reach the limits of the area that has been permitted for excavation:

Has the Department of Environmental Protection conducted an on-site inspection since the most recent previous report?

I certify under penalty of law that I believe the information and statements included in this application to be true, complete, and accurate based upon reasonable diligence and inquiry

Signature of Filer

Printed Name of Filer

Title

Date