# ACT 250
# MUNICIPAL IMPACT QUESTIONNAIRE

This questionnaire is intended to help applicants gather evidence to submit under Criterion 7 - Municipal Services. A letter or narrative from the Town Manager, Selectboard Chair or appropriate official may also serve as evidence.

**APPLICANT TO COMPLETE:**

DRAFT

Applicant Name:
Municipality:
Title and Date of Site Plan Submitted:

**TOWN MANAGER, DEPARTMENT HEADS, OR EQUIVALENT TO COMPLETE:**

a) Does the municipality have the capacity to provide the following services without unreasonable burdens for the above project:

| | | | |
|---|---|---|---|
| Fire Protection | __Yes | ✓No | __ Mun. does not provide this service. |
| Police Protection | ✓Yes | __No | __ Mun. does not provide this service. |
| Rescue Service | ✓Yes | __No | __ Mun. does not provide this service. |
| Solid Waste Disposal | ✓Yes | __No | __ Mun. does not provide this service. |
| Road Maintenance | ✓Yes | __No | __ Mun. does not provide this service. |

b) If "no", what are the deficiencies? See attached

c) If the service is unavailable from the municipality, who provides the service so that the town doesn't have to? N/A

d) Would the deficiencies occur without this project? ✓Yes or __No? If "no", what measures can the applicant take to alleviate the deficiencies?

e) If the deficiencies are common to many projects, does this project create burdens which are disproportionate to the taxes and user fees to be paid to the municipality? __Yes or ✓No? If "yes", does the municipality recommend the imposition of an impact fee or other means to mitigate any unreasonable burdens?

f) Are you available, after sufficient notice, to answer questions related to the above statements at an Act 250 hearing? ✓Yes or __No

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

Name: JOE COLLANGELO
Position: TOWN ADMINISTRATOR
Date: 11-APRIL-2013