

STATE OF MAINE

PETITION TO REQUIRE AGENCY RULEMAKING

We, the undersigned qualified voters of the State of Maine, hereby

petition the _____
(Name of Agency)

pursuant to 5 M.R.S.A. §8055 to: (check one)

Adopt a
New Rule

Modify
Chap. _____ Sec. _____

Repeal
Chap. _____ Sec. _____

The proposed change would _____
(Summarize content and impact of proposal)*

The text of the new or modified rule would read:*

For purposes of communication with the agency concerning this petition, the petitioners designate as their representative the following individual:

(Name)

(Mailing Address)

(Phone)

FOR AGENCY USE

Completed petition was received by

(Agency)

(Signature)

*Use additional page(s), if necessary

SIGNATURE	STREET ADDRESS (Not P.O. , Box or R.F.D.)	TOWN OF CITY Where Register to Vote	NAME PRINTED
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			

SIGNATURE	STREET ADDRESS (Not P.O. , Box or R.F.D.)	TOWN OF CITY Where Register to Vote	NAME PRINTED
20.			
21.			
22.			
23.			
24.			
25.			
26.			
27.			
28.			
29.			
30.			
31.			
32.			
33.			
34.			
35.			
36.			
37.			
38.			
39.			

SIGNATURE	STREET ADDRESS (Not P.O. , Box or R.F.D.)	TOWN OF CITY Where Registere to Vote	NAME PRINTED
40.			
41.			
42.			
43.			
44.			
45.			
46.			
47.			
48.			
49.			
50.			

STATE OF MAINE
AUTHENTICATION OF PETITIONS FOR RULEMAKING

CIRCULATOR'S VERIFICATION

I, _____, hereby swear or affirm that the signatures to this petition were made in my presence and that to the best of my knowledge and belief each signature is that of the person it purports to be and each petitioner is a resident of the State of Maine.

(Signature of Circulator)

Subscribed and sworn before me on _____
(Date)

(Signature of Notary Public)

REGISTRAR/BOARD OF REGISTRATION CERTIFICATE

I, _____ Registrar of Voters/Member, Board of

Registration of Voters for _____ certify
(Name of Municipality)

that EACH of the name of the foregoing petitioners numbered (CIRCLE EACH OF THE NUMBERS CORRESPONDING TO THE SIGNATURES BEING CERTIFIED)

- | | | | | | | | | | | | |
|----|----|----|----|----|----|----|----|----|----|----|----|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |
| 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 |
| 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35 | 36 |
| 37 | 38 | 39 | 40 | 41 | 42 | 43 | 44 | 45 | 46 | 47 | 48 |
| 49 | 50 | | | | | | | | | | |

appear on the voting list of this municipality as qualified voters. The total number of signatures certified is _____.

(Signature)

(Date)