



TOWN of Sebago – Zoning Board of Appeals

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ABUTTERS LIST FORM

(Make additional copies of this form as needed in order to submit a complete list.)

ABUTTER NAME(S): _____

MAILING ADDRESS: _____

CITY/STATE/ZIP: _____

PROPERTY ADDRESS: _____

MAP # _____ LOT # _____

ABUTTER NAME(S): _____

MAILING ADDRESS: _____

CITY/STATE/ZIP: _____

PROPERTY ADDRESS: _____

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