

Town of \_\_\_\_\_

## Permit Application

Application Date: \_\_\_\_/\_\_\_\_/20\_\_\_\_

### Permit Type Requested:

New Construction    Expansion    Accessory Building    Reconstruction    Earth Moving  
 Dock/Deck    Fence    Foundation    Road/Driveway    Other \_\_\_\_\_

## General Information

**Applicants Name:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Telephone Numbers:**  
Days: \_\_\_\_\_  
Nights: \_\_\_\_\_  
Cell: \_\_\_\_\_

Is the applicant also the property owner?    Yes    No (if no, complete owner info below and a letter of authorization must be attached)

**Owner(s) Name:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Telephone Numbers:**  
Days: \_\_\_\_\_  
Nights: \_\_\_\_\_  
Cell: \_\_\_\_\_

**Contractor Name:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Telephone Numbers:**  
Days: \_\_\_\_\_  
Nights: \_\_\_\_\_  
Cell: \_\_\_\_\_

## Property Information

**Road Number and Name:** \_\_\_\_\_

**Map:** \_\_\_\_\_   **Lot:** \_\_\_\_\_   **Lot Area:** \_\_\_\_\_  acres    square Feet

**Zoning District(s):**    RP    RR    GA 1    GA 2A    GA 2B    Wetland

**Existing Use:** \_\_\_\_\_

**Proposed Use:** \_\_\_\_\_



**PLOT PLAN**

Please be as detailed as possible. Please include all present and proposed structures, wells, septic systems, driveways, and edge of clearing. Also include setbacks of structures to each other and to lot and water lines. (See sample).

**I hereby attest the above drawing and dimensions are correct to the best of my knowledge.**

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Owner's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## **Erosion Control Plan**

**Before any soil is disturbed, I will properly install and maintain an erosion control barrier. This barrier will be adequate to prevent and soil erosion that may take place due to the construction project. The barrier shall remain in place until construction is complete and any disturbed area is re-vegetated and stabilized.**

**I have marked clearing limits on the site to keep equipment out of areas with in setbacks.**

**I will preserve buffers between the work area and any downstream surface water and wetlands.**

**By signing this form, I agree to follow all erosion control measures and Best Management Practices as defined by the Department of Environmental Protection.**

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Owner's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Checklist:**

Check all that apply:

Check off for all Project where Applicable:

<input type="checkbox"/> Code Enforcement Approval	<input type="checkbox"/> Complete Application
<input type="checkbox"/> Planning Board Approval	<input type="checkbox"/> Paid appropriate Fee
<input type="checkbox"/> Board of Appeals Approval	<input type="checkbox"/> Lot Area
<input type="checkbox"/> Flood Hazard Development Permit	<input type="checkbox"/> % Lot Coverage
<input type="checkbox"/> HHE-200 Permit	<input type="checkbox"/> Height of Structure
<input type="checkbox"/> Internal Plumbing Permit	<input type="checkbox"/> Setbacks from water lines
<input type="checkbox"/> DEP Permit (Site, Storm, NRPA)	<input type="checkbox"/> Setbacks from parcel lines
<input type="checkbox"/> Army Corps of Engineers Permit	<input type="checkbox"/> Expansion calculations for non-conforming structures
<input type="checkbox"/>	<input type="checkbox"/> Planting Plan for Special Expansion Allowance
<input type="checkbox"/>	<input type="checkbox"/> Copy of Right, Title or Interest and/or Deed
<input type="checkbox"/>	<input type="checkbox"/> Elevation of the lowest floor
<input type="checkbox"/>	<input type="checkbox"/> Soil Erosion Control Plan

**Inspections:**

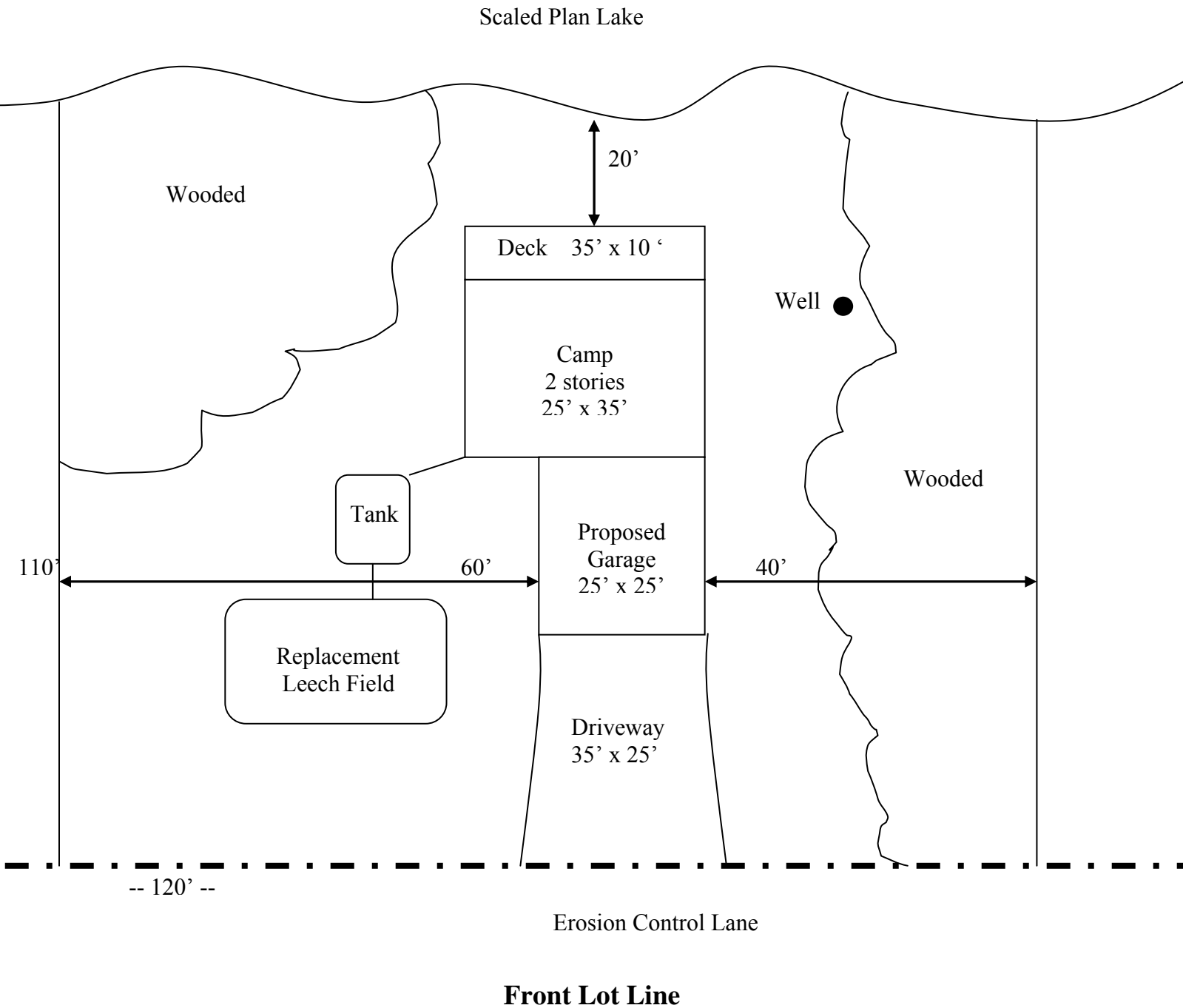
Completed?

Notes:

<input type="checkbox"/> Prior to Clearing and Excavation	
<input type="checkbox"/> Foundation	
<input type="checkbox"/> Prior to Landscaping	
<input type="checkbox"/> Prior to Occupancy	

# Sample Plot Plan

1" = 20'



**This sketch is for representation purposes only. Please refer to the Shoreland Zoning Ordinance for setback requirements, etc.**

# Approval or Denial of Application

Permit Fee: \_\_\_\_\_

Permit #: \_\_\_\_\_

Date: \_\_\_\_\_

This Application is:  Approved  Denied

If approved, the following conditions apply:

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If denied, reasons for denial:

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\_\_\_\_\_  
Code Enforcement Officer

\_\_\_\_\_  
Date