TOWN OF ROBBINSTON
BUILDING PERMIT APPLICATION

PLANNING BOARD MEETINGS
WHEN: THIRD THURSDAY OF EVERY MONTH AT 6:00 P.M.
WHERE: ROBBINSTON TOWN OFFICE
(NO MEETINGS IN NOVEMBER & DECEMBER DUE TO THE HOLIDAYS)

IMPORTANT INFORMATION
- You must be present when your application is presented to the board. Please do not ask a board member to submit your application for you.
- No application will be approved at the meeting without the proper plumbing permits.
  - Applicant must sign all yellow highlighted areas (Pages 1 and 5).

CONTACT INFO
- Chad Allen – Planning Board Secretary – 207-454-0060
- Eric Morrell – Planning Board Chairman – 207-904-7912
- Jim Slowe – Code Enforcement Officer – 207-788-3877
- Terry Johnson – Licensed Plumbing Inspector – 207-454-8317
  - Dana Altvater – Site Evaluator – 207-853-2462

PAYMENTS AND FEES
- We only accept CHECKS and CASH
- If paying by check, please make payable to: TOWN OF ROBBINSTON
- Application fee is $50.00 per application (FEE STILL APPLIES TO DENIED APPLICATIONS)
- Square footage fee is $0.08 per square foot (EX. 1,200 SQ. FT. HOME IS: 1,200x$0.08=$96.00)
  - PAYMENT IS DUE UPON APPROVAL OF YOUR APPLICATION
TOWN OF ROBBinston
BUILDING PERMIT APPLICATION

I AM APPLYING FOR A: ___SHORELAND ZONE PERMIT  ___LAND USE PERMIT

APPLICANT INFORMATION

<table>
<thead>
<tr>
<th>Applicant Name:</th>
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<tbody>
<tr>
<td>Applicant Phone #:</td>
<td>Home:</td>
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<tr>
<td>Applicant Address:</td>
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PROPERTY INFORMATION

| Property Address/Location: |  |
| Tax Map/Page & Lot #: |  |
| Zoning District: (check one) | Residential | Commercial |
| Property Owner Name: |  |
| Property Owner Phone #: | Home: | Cell: |

Please check all that apply:

_____ New Construction  _____ Alteration  _____ Commercial  _____ Residence  _____ Year-Round  _____ Seasonal

Existing Use of Property:

______________________________________________________________________________

Describe Intended Use of Property:

______________________________________________________________________________

CONSTRUCTION INFORMATION

Please provide the square footage of each:

_____ Slab  _____ Basement  _____ 1st Floor  _____ 2nd Floor  _____ Garage  _____ Other

Mobile Home Make and Model:

Year:

Width & Length:

Estimated Cost of Construction:

Contractor Name:

Contractor Phone #:

LAND INFORMATION

Describe Land Alteration:

______________________________________________________________________________

Please provide the square footage of each:

_____ Gravel  _____ General Fill  _____ Sand  _____ Loam  _____ Rocks  _____ Rip-Rap

Footage on Road:

Footage Covered by Vegetation Surfaces:

Projects requiring septic systems must have a design by a licensed soil evaluator. If a closed vault, a plumbing permit is also required. It is the responsibility of the applicant to obtain all required permits: local, federal, and state and to pay all required fees before work begins. The undersigned agrees to comply with all municipal, state, and federal laws and regulations.

Applicant Signature: ____________________________ Date: ____________________________
TOWN OF ROBBINSTON
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Please include:

- Lot boundaries with abutting properties.
- Area to be cleared of trees and vegetation.
- Exact position of proposed structures - including decks.
- Out buildings with accurate setback distances from the shoreline.
- Side and rear property lines.
- Location of proposed wells, septic systems, driveways.
- Area and amounts to be filled or graded.

***If this is an expansion of an existing structure, please distinguish between the existing structure and the proposed expansion.***
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SITE PLAN

FRONT AND REAR EVALUATION

SIDE EVALUATION
TOWN OF ROBBINSTON
BUILDING PERMIT APPLICATION

THIS APPLICATION IS: ____ APPROVED   ____DENIED

IF APPROVED, THE FOLLOWING CONDITIONS ARE PRESCRIBED:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
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IF DENIED, THE REASON FOR DENIAL IS:
________________________________________________________________________
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CODE ENFORCEMENT OFFICER SIGNATURE   DATE
TOWN OF ROBBinston
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ADDITIONAL PERMITS, APPROVALS AND OR REVIEWS REQUIRED

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<th>CHECK IF REQUIRED</th>
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<tbody>
<tr>
<td>__ Planning Board Review/Approval</td>
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<td>__ Board of Appeals Review/Approval</td>
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<td>__ Flood Hazard Development Permit</td>
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<td>__ Exterior Plumbing Permit (approved HHE 200 App. Form)</td>
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<td>__ Interior Plumbing Permit</td>
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<td>__ DEP Permit (Site Location, Natural Resource Act)</td>
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<td>__ Army Corps Engineers Permit</td>
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<td>__ Town Road Review</td>
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Note: Applicant is advised to consult with the Code Enforcement Office and appropriate State and Federal agencies to determine whether additional permits, approvals and reviews are required. I certify that all the information given in this application is accurate. All proposed use shall be in conformance with this application and the Town of Robbinston Shoreland Zoning ordinances. I agree to future inspections by the Code Enforcement office at reasonable hours.

APPLICANT SIGNATURE ___________________________________________________________________________

APPLICATION FEE ________ SQ. FT. FEE ________ TOTAL DUE ________

PAYMENT TYPE: CASH ________ CHECK ________