

IMPORTANT NOTICE TO APPLICANTS

**YOU MUST BE PRESENT WHEN YOUR
APPLICATION IS PRESENTED TO THE
BOARD. PLEASE DO NOT ASK A BOARD
MEMBER TO SUBMIT YOUR
APPLICATION.**

**NO APPLICATIONS WILL BE APPROVED
AT THE MEETING WITHOUT THE PROPER
PLUMBING PERMITS. ALL PERMITS
MUST HAVE STICKERS TO BE VALID.**

**THANK YOU FOR YOUR
COOPERATION.
ROBBINSTON PLANNING BOARD**

**Town of Robbinston
Land Use Application**

Permit # _____

\$20.00 NON REFUNDABLE APPLICATION FEE DUE UPON RECEIPT OF APPLICATION
.08/SQUARE FOOT DUE WHEN APPLICATION IS APPROVED

FEES PAID: \$ _____ CASH OR CHECK _____

APPLICANT _____ PHONE NO. _____
ADDRESS _____

PROPERTY INFORMATION

LOCATION _____
TAX MAP/PAGE AND LOT # _____ ZONING DISTRICT _____
OWNER _____ ADDRESS _____
CONTACT PHONE NUMBERS _____

CONTRACTOR _____ PHONE NO. _____
CONTACT PHONE NUMBERS _____

PLEASE CHECK ALL THAT APPLY: _____ NEW CONSTRUCTION _____ ALTERATION
_____ COMMERCIAL _____ RESIDENCE _____ YEAR ROUND _____ SEASONAL

EXISTING USE OF PROPERTY _____
DESCRIBE INTENDED USE _____

CONSTRUCTION INFORMATION

PLEASE GIVE 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 _____

LAND INFORMATION

DESCRIBE LAND ALTERATION: _____

PLEASE FILL IN MEASUREMENTS FOR EACH: (SQ FEET OR YARDS)
SIZE INVOLVED _____ GRAVEL _____ GENERAL FILL _____ SAND _____
LOAM _____ ROCKS _____ RIP-RAP _____
FOOTAGE ON ROAD _____ FOOTAGE COVERED BY VEGETATION SURFACES _____

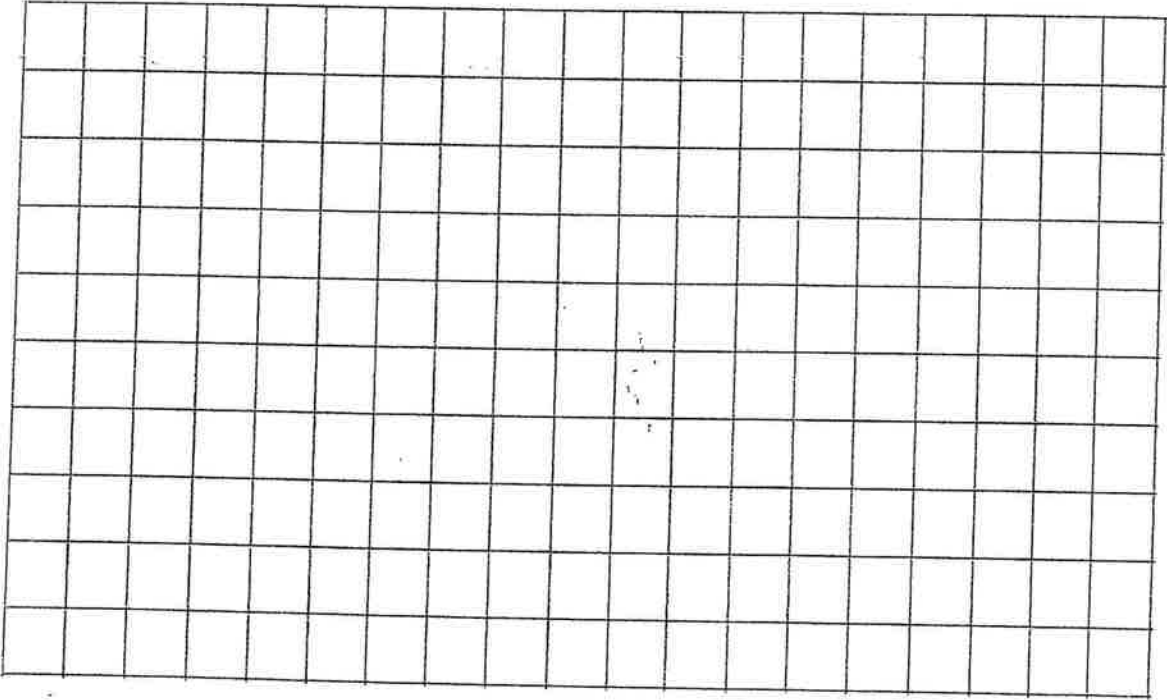
**PROJECTS REQUIRING SEPTIC SYSTEMS MUST HAVE A DESIGN BY A LICENSED SOIL
EVALUATOR. IF A CLOSED VAULT, A PLUMPING PERMIT IS ALSO REQUIRED. IT IS
THE RESPONSIBILITY OF THE APPLICANT TO OBTAIN ALL REQUIRED PERMITS:
LOCAL, FEDERAL, AND STATE AND ALL REQUIRED FEES BEFORE WORK BEGINS. THE
UNDERSIGNED AGREES TO COMPLY WILL ALL MUNICIPAL, STATE, AND FEDERAL
LAWS AND REGULATION.**

APPLICANT _____ DATE _____

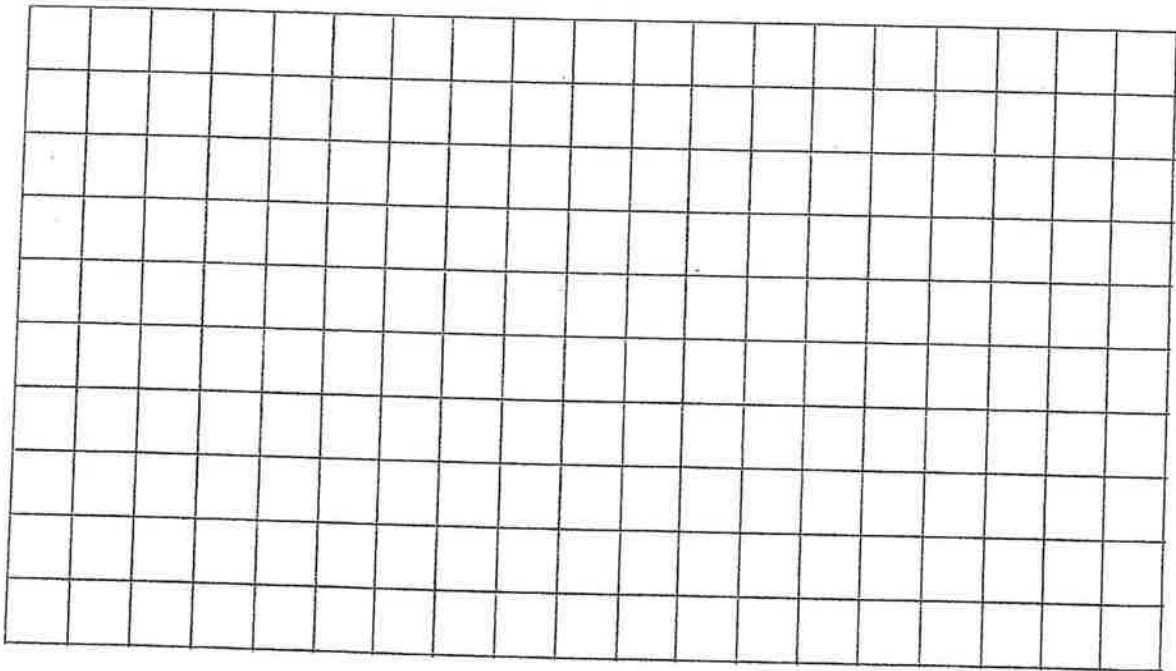
TOWN OF ROBBINSON

SITE PLAN

FRONT AND REAR EVALUATION



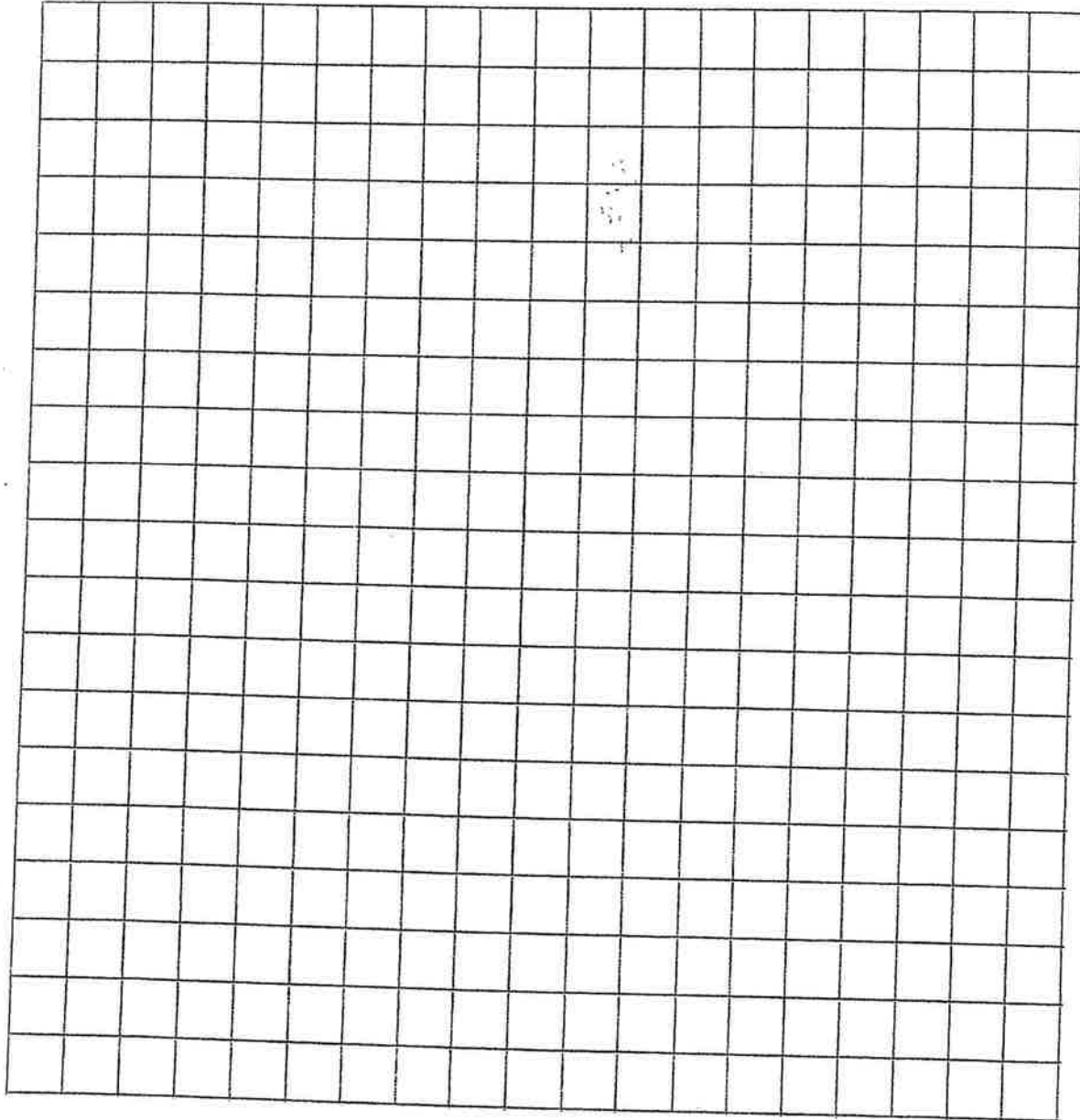
SIDE EVALUATION



TOWN OF ROBBINSTON

PLEASE INCLUDE: LOT BOUNDARIES WITH ABUTTING PROPERTIES, AREA TO BE CLEARED OF TREES AND VEGETATION, EXACT POSITION OF PROPOSED STRUCTURES, INCLUDING DECKS, OUT BUILDING S WITH ACCURATE SETBACK DISTANCES FROM THE SHORE LINE, SIDE AND REAR PROPERTY LINES, LOCATION OF PROPOSED WELLS, SEPTIC SYSTEMS, AND 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.



TOWN OF ROBBINSTON

ADDITIONAL PERMITS, APPROVALS AND OR REVIEWS REQUIRED

CHECK IF REQUIRED	GRANTED	DATE AND NO.
_____ PLANNING BOARD REVIEW/APPROVAL	_____	_____
_____ BOARD OF APPEALS REVIEW/APPROVAL	_____	_____
_____ FLOOD HAZARD DEVELOPMENT PERMIT	_____	_____
_____ EXTERIOR PLUMBING PERMIT (APPROVED HHE 200 APP. FORM)	_____	_____
_____ INTERIOR PLUMBING PERMIT	_____	_____
_____ DEP PERMIT (SITE LOCATION, NATURAL RESOURCE ACT)	_____	_____
_____ ARMY CORPS ENGINEERS PERMIT	_____	_____
_____ ELECTRICAL PERMIT	_____	_____
_____ D.O.T. PERMIT .	_____	_____
_____ BORROW PIT	_____	_____
_____ E.P.A.	_____	_____
_____ TOWN ROAD REVIEW	_____	_____

NOTE: APPLICANT IS ADVISED TO CONSULT WITH THE CODE ENFORCEMENT OFFICER 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 USED SHALL BE IN CONFORMANCE WITH THIS APPLICATION AND THE TOWN OF ROBBINSTON SHORELAND ZONING ORDINANCES. I AGREE TO FUTURE INSPECTIONS BY THE CODE ENFORCEMENT OFFICER AT REASONABLE HOURS.

_____ APPLICANTS SIGNATURE	_____ DATE
_____ CHAIRMAN SIGNATURE	_____ DATE
_____ CO-CHAIR SIGNATURE	_____ DATE
_____ MEMBER SIGNATURE	_____ DATE
_____ MEMBER SIGNATURE	_____ DATE
_____ MEMBER SIGNATURE	_____ DATE

TOWN OF ROBBINSTON

THIS APPLICATION IS: _____ APPROVED _____ DENIED

IF APPROVED, THE FOLLOWING CONDITIONS ARE PRESCRIBED:

IF DENIED, THE REASON FOR DENIAL IS:

NOTE: IF APPROVED A SHORE LAND ZONING PERMIT, THE PROPOSED SHALL COMPLY WITH INFORMATION IN THIS APPLICATION AND REQUIREMENTS OF THE SHORELAND ZONING ORDINANCE FOR THE TOWN OF ROBBINSTON AND THE STATE OF MAINE.

CODE ENFORCEMENT OFFICER

DATE