



**Town of Harpswell
Code Enforcement Office
Building/Land Use Permit Application**

Site Address: _____

Map: _____

Lot(s): _____

Codes office use only

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Conditions of Approval / Comments:

Lot Size: _____
Impermeable Coverage %: _____

Permit Types(s) Requested:

New Structure Addition Remodel
 Replacement Accessory Structure
 Generator Deck Shed
 Driveway Earth Moving/Filling
 Demolition Other _____

Owner Name: _____	Telephone Numbers:
Mailing Address: _____	Cell: _____
E-Mail Address: _____	Home: _____

Applicant/Contractor Name: _____	Telephone Numbers:
Mailing Address: _____	Cell: _____
E-Mail Address: _____	Office: _____

OWNER STATEMENT (*check all boxes and initial*) _____ **Applicant Initials**

- I certify that this is an application only and that I may not start any part of my project without first receiving my permit.
- I will notify the building inspector when the work is ready for required inspection(s).
- This structure shall not be occupied until a certificate of occupancy has been issued.
- I have read this application, agree to comply with all city ordinances and applicable laws regulating building construction, and am or legally represent the owner of the property for the purpose of this permit.

Signature of Owner _____ date _____
OR
Signature of Applicant _____ date _____

MAIL PERMIT TO (CHOOSE ONE): APPLICANT CONTRACTOR OWNER

ESTIMATED COST OF CONSTRUCTION: _____ (mandatory for Assessing)

ZONE (check one) INT SR CF-1 CF-2 RP

DESCRIBE YOUR PROPOSED ACTIVITY: the type of building, length, width, height, number of stories, and proposed use. Be thorough to avoid delays in review of your project. **Please include floor plans and/or plot plans.**

<p><u>PROPOSED PROPERTY LINE SETBACKS</u></p> North _____ East _____ South _____ West _____	<p><u>PROPOSED WATER SETBACKS</u></p> Wetland _____ Highest Annual Tide _____ River/Stream _____ Resource Protection _____	<p><u>TYPE OF WATER SUPPLY:</u> <input type="checkbox"/> Dug Well <input type="checkbox"/> Drilled Well <input type="checkbox"/> Community Well</p> <p><u>TYPE OF SEPTIC SYSTEM:</u> <input type="checkbox"/> Leach Field <input type="checkbox"/> Holding Tank <input type="checkbox"/> OBD <input type="checkbox"/> Unknown</p>
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PROPOSED CONSTRUCTION ACTIVITY:

Structure Dimensions: L _____ W _____ #Stories _____ Garage s.f. _____
Basement s.f. _____ 1st Story s.f. _____ 2nd Story s.f. _____ Deck/Patio s.f. _____
Structure Height: Present _____ Proposed _____ Other s.f. _____
Number of Bedrooms: Present _____ Proposed _____ Shed s.f. _____
Number of Bathrooms: Present _____ Proposed _____
Total Impermeable Lot Coverage*: Present s.f. _____ % _____ Proposed s.f. _____ % _____
*Include **all non-vegetated** land area: buildings, porches, sheds, driveways, parking areas, patios, etc.

MODULAR AND MOBILE HOMES

Year Made _____ Make _____ Model _____ Size _____
Serial Number _____ HUD Certification Number _____
Foundation Type & Size _____ Prestressed Concrete Pads Size _____
Gravel Pad _____ Other _____

REMINDERS (check all boxes and initial) _____ Applicant Initials

- Permit Fees - \$50 Application fee PLUS \$0.45/square foot; Additional charges determined by CEO**
- 2021 MUBEC – Radon & Blower Door results are required with all new Dwellings**
- Flood Plain Management Ordinance - Elevation Certificate may be required**

PLOT PLAN GUIDELINES (*check all boxes*)

- Plot Plan** – Please attach a drawing to scale or with detailed dimensions.
 - **For New and/or Expanded Structures:** Include existing and proposed structures, wells, septic, driveways, and setbacks
 - **For Interior Work Only:** Include existing layouts and the proposed plan.
- Building Envelope** – Refer to Basic Land Use Ordinance and Shoreland Zoning Ordinance
 - **Interior Zone Building Envelope:** All Structures must be 40’ from traveled way and 20’ from boundary line
 - **Shoreland Zone Building Envelope:** All Structures must be 75’ from HAT and 25’ from boundary lines

OWNER STATEMENT OF ACCURACY AND EROSION CONTROL

(*check boxes and initial*) _____ **Applicant Initials**

- I hereby attest that the Plot Plan drawing and dimensions are correct to the best of my knowledge.
- Before any soil is disturbed, I will properly install and maintain an erosion control barrier. This barrier will be adequate to prevent any 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.

Signature of Applicant _____ date _____

OR

Signature of Owner _____ date _____

Please submit a plot plan for reference.

If applicable, please also include an existing and proposed floorplan.

Submit your completed application to dperry@town.harpswell.me.us

