Entered	Com	pleted	

City of Old Town

Building Permit Application

Permit #		
Map #	Lot #	Date Issued
Address of Work:		
Zone		
Shoreland Zone (y/r	1)	Flood Zone y/n
Owners Name:		
Address:		
		Zip
Phone:		
Applicants Name:		
Address:		
		Zip
Home Phone:		Business Phone:
Tota	ir Conditioning al Cost	e named property, or that the proposed work is authorized by the
owner of the record and the and I agree to conform to application is issued, I certification is issued, I certification is issued.	at I have been authoriz all applicable laws of th fy that the code official	e hamed property, or that the proposed work is authorized by the ed by the owner to make the application as his authorized agent e jurisdiction. In addition, if a permit for work described in this or the authorized representative shall have the authority to enter provisions of the codes and laws applicable to such permit.
Signature of Applicant		Date
		 Fee

(SHOW LOT LINES, EASEMENTS AND WORK LAYOUT & DIMENSIONS)

Present:		
Proposed:		
Number of Dwelling Units:		
Present:		
Proposed:		
Lot Size (sq. feet or acres)		
STRUCTURE INFORMATION:		
# of stories:	Building He	ght:
		Drivato
Type of water supply	Public	FIIVate
Type of sewer If the project includes increasing the	Public ne number of bedroor	Private ns, is the septic syste
Type of sewer	Public ne number of bedroor	Private ns, is the septic syste
Type of sewer If the project includes increasing the designed to meet the expansion?	Public ne number of bedroor Yes	Private ns, is the septic syste
Type of sewer If the project includes increasing the designed to meet the expansion? OTHER INFORMATION:	Public ne number of bedroor Yes	Private ms, is the septic syste No
Type of sewer If the project includes increasing the designed to meet the expansion? OTHER INFORMATION: Architect or Engineer	Public ne number of bedroor Yes	Private ms, is the septic syste No
Type of sewer If the project includes increasing the designed to meet the expansion? OTHER INFORMATION: Architect or Engineer Mailing Address	Public ne number of bedroor Yes	Private ns, is the septic syste No Phone

pursuant to M.R.S. 38 § 439-B.

FOR OFFICE USE ONLY - do not write on this page				
FC	OR OFFICE USE ONLY - do not write	e on this page		
SHORELAND ZONE _		PLANNING BRD	APPROVAL	
FLOODZONE _		ZONING BRD AF	PPROVAL	
LOT COVERAGE _		FEASIBILITY		
SETBACK FRONT _ SIDE _ SIDE _ REAR _				
PARKING				
Permit appro Date	oved	Permit denied Forward to Zoni Zoning Board of	-	
Reviewed by	/ :			
Permit Numl	ber			
Date issued				
Fee	\$			
PERMIT TYPE:				
1A N 2 G 3 A 4 S 5 P	Iew Home Mobile Home Garage (Residential) Add. & Alt. (Residential) Sheds Porches & Decks Other Residential	7 8 9 10 11 12 13	New Commercial Add. & Alt.(Commercial) New Industrial Add. & Alt.(Industrial) Other Demolition Moving	

NOTES:		
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