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)

AS OF 4/20/2023 THERE WILL BE A MINIMUM OF 10 DAYS FOR THE PLANNING BOARD AND CODE ENFORCEMENT OFFICER TO REVIEW ANY SUBMITTED APPLICATION(S) BEFORE A BUILDING PERMIT IS ISSUED. PLEASE TAKE THIS INTO CONSIDERATION WHEN SCHEDULING CONTRACTORS AND SERVICES. NO WORK IS TO BEGIN WITHOUT AN APPROVED BUILDING PERMIT APPLICATION.

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 APPLICATIONS WILL BE APPROVED WITHOUT PROPER INTERIOR AND EXTERIOR PLUMBING PERMITS.

Applicant must sign all yellow highlighted areas (Pages 1 and 5).

CONTACT INFO

- Chad Allen Planning Board Secretary 207-904-8649
- Doug Diffin Planning Board Chairman 207-671-4340
- Andrew Snowman Code Enforcement Officer 207-214-6300
- Steven Cox Licensed Plumbing Inspector 207-263-6887
 - 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

PERMIT #____ TOWN OF ROBBINSTON BUILDING PERMIT APPLICATION

I AM APPLYING FOR A: _____SHORELAND ZONE PERMIT ____LAND USE PERMIT

APPLICANT INFORMATION

Applicant Name:					
Applicant Phone #:	Home:		Cell:		
Applicant Address:					
		ERTY INFO	RMATION		
Property Address/Lo					
Tax Map/Page & Lot			_		
Zoning District: (chee		idential	Commercial		
Property Owner Nan			A 11		
Property Owner Pho	ne #: Home:	(Cell:		
Please check all that	apply:				
New Construction	on Alteration	Commercial	Residence	Year-Round	Seasonal
		· · · · · ·			
Existing Use of Prop	erty:				
Describe Intended U	Ise of Property:				
Describe Intended C	se of i topetty.				
	CONSTD	UCTION IN	FORMATIO	NT	
T01 · 1 · 1			FORMATIO	IN	
Please provide the sq	luare footage of eac	h:			
Slab	Basement	1 st Floor	2 nd Floor	Garage	Other
Mobile Home Make	e and Model:				
Year:					
Width & Length:					
Estimated Cost of C	onstruction.				
Contractor Name:					
Contractor Phone #	4.				
		ND INFORM			
D			IATION		
Describe Land Alte	eration:				
 		1			
Please provide the	square footage of	each:			
Gravel	General Fill	Sand	Loam	Rocks	Rip-Rap
Footage on Road:					
Footage Covered by	Vegetation Surfaces:				
	0	4. 4	TO 1		
Projects requiring septic systeresponsibility of the applicant			,		-
undersigned agrees to comply					-8
Applicant Signature				Date	
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TOWN OF ROBBINSTON BUILDING PERMIT APPLICATION

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

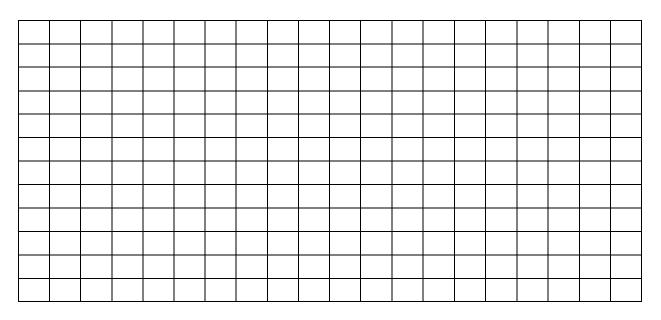
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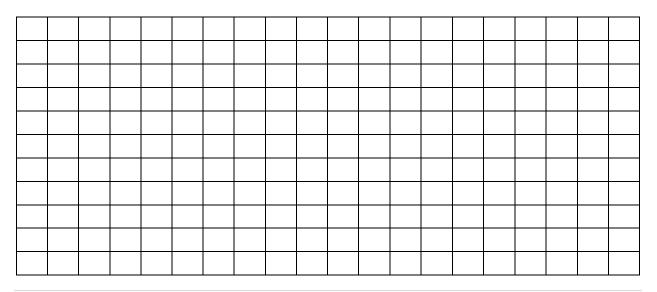
PERMIT #____ TOWN OF ROBBINSTON BUILDING PERMIT APPLICATION

SITE PLAN

FRONT AND REAR EVALUATION



SIDE EVALUATION



PERMIT # TOWN OF ROBBINSTON BUILDING PERMIT APPLICATION																		
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IF DEN	IED,	THI	E RE	EAS	ON I	FOR	DE	NIA	L IS:									

NOTE: IF APPROVING A SHORELAND 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 SIGNATURE

DATE

TOWN OF ROBBINSTON BUILDING PERMIT APPLICATION

ADDITIONAL PERMITS, APPROVALS AND OR REVIEWS REQUIRED

CHECK IF REQUIRED	GRANTED	DATE	NO.
Planning Board Review/Approval			
Board of Appeals Review/Approval			
Flood Hazard Development Permit	<u> </u>		
Exterior Plumbing Permit (approved HHE 200 App. Form)			
Interior Plumbing Permit	<u> </u>		
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 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	DATE
CHAIRMAN SIGNATURE	DATE
MEMBER SIGNATURE	DATE
MEMBER SIGNATURE	DATE
MEMBER SIGNATURE	DATE
MEMBER SIGNATURE	DATE

PAYMENT INFO

PERMIT #____ TOWN OF ROBBINSTON BUILDING PERMIT APPLICATION

APPLICATION FEE	_	TOTAL	
	DUE		
PAYMENT TYPE:	CASH	CHECK	