

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
- Steven Cox -Licensed Plumbing Inspector – 207-263-6887
- Steven Cox -Code Enforcement 207-263-6877
- 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 ROBBINSON

BUILDING PERMIT APPLICATION

I AM APPLYING FOR A: ____ SHORELAND ZONE PERMIT ____ LAND USE PERMIT

APPLICANT INFORMATION

Applicant Name:		
Applicant Phone #:	Home:	Cell:
Applicant Address:		

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.

PERMIT # _____

TOWN OF ROBBINSTON BUILDING PERMIT APPLICATION

Applicant Signature _____

Date _____

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.**

[illegible]

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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THIS APPLICATION IS: _____ APPROVED _____ DENIED

IF APPROVED, THE FOLLOWING CONDITIONS ARE PRESCRIBED:

IF DENIED, THE REASON FOR DENIAL IS:

TOWN OF ROBBINSTON
BUILDING PERMIT APPLICATION

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

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	_____	_____	_____
☐ 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 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

PERMIT # _____

TOWN OF ROBBINSON

BUILDING PERMIT APPLICATION

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

APPLICATION FEE _____ SQ. FT. FEE _____ TOTAL _____
DUE _____

PAYMENT TYPE: CASH _____ CHECK _____