



BUILDING & USE APPLICATION

TOWN OF CASTINE

P.O. BOX 204 – 67 COURT STREET

CASTINE, MAINE 04421

PHONE (207) 326-4502; FAX (207) 326-9465 EMAIL: townoffice@castine.me.us

CEO Use Only
RECEIVED
By _____
Date _____

NOTE: This application is for a Building & Use Permit pursuant to the *Zoning Ordinance of the Town of Castine, Maine*. It is the applicant's responsibility to obtain and submit all material and information required by the Ordinance and to obtain any permits or approvals required by other regulations applicable to this project. **Please note the Code Enforcement Officer and Planning Board can not act on an incomplete application.**
The applicant and property owner grant the CEO reasonable access to the project site as provided in § 8.3. The applicant and property owner, by submission of this application, acknowledge this notice.

• **PROPERTY OWNER** CHECK (✓) IF APPLICANT
NAME: _____
MAILING ADDRESS: _____
CITY, STATE, ZIP: _____ PHONE: _____
EMAIL ADDRESS (IF APPLICANT): _____

• **ARCHITECT, ENGINEER OR CONTRACTOR** CHECK (✓) IF APPLICANT
NAME: _____
MAILING ADDRESS: _____
CITY, STATE, ZIP: _____ PHONE: _____
EMAIL ADDRESS (IF APPLICANT): _____

• **PROPERTY INFORMATION**
DEED RECORDED IN BOOK _____ PAGE _____ AT HANCOCK COUNTY REGISTRY OF DEEDS
TAX MAP # _____ LOT # _____ STREET ADDRESS _____
ZONING DISTRICT _____ RESOURCE PROTECTION ZONE? YES NO
SHORELAND ZONE? YES NO SOURCE WATER PROTECTION ZONE? YES NO
HISTORIC SITE OR ZONE? YES NO MARITIME ACTIVITY ZONE? YES NO
CONFORMING LOT? YES NO IS THE LOT PART OF SUBDIVISION? YES NO
DO EXISTING STRUCTURES CONFORM TO DIMENSIONAL REQUIREMENTS FOR THE ZONING DISTRICT?
 YES NO NONE IF "NO," DESCRIBE THE NONCONFORMANCE _____
EXISTING USE OF PROPERTY _____ PROPOSED USE _____

• **DIMENSIONAL INFORMATION**
LOT SIZE LENGTH (FT) _____ WIDTH (FT) _____ AREA (SF OR AC) _____
LOT COVERAGE PERCENT COVERED BY STRUCTURES _____ (%) AND BY OTHER IMPERVIOUS AND
NON-VEGETATED SURFACES _____ (%) AT THE COMPLETION OF PROJECT
SHORELINE FRONTAGE (FT) _____ SETBACK (FT) _____
SETBACKS FRONT (FT) _____ SIDE (FT) _____ REAR (FT) _____
OTHER STRUCTURE HEIGHT (FT) _____ CLEARED OPENING IN CANOPY IN SLZ (SF) _____

• **PROJECT INFORMATION (CHECK ALL APPLICABLE ITEMS)**
 NEW STRUCTURE EXPANSION OF EXISTING STRUCTURE DEMOLITION
 REPAIR/REPLACEMENT ALTERATION/REMODEL CHANGE OF USE
 EARTHMOVING NOT RELATED TO BUILDING CONSTRUCTION OTHER

• **DESCRIBE PROPOSED PROJECT:** _____

• **EARTHMOVING**

TOTAL MATERIAL TO BE REMOVED FROM THE SITE (CY) _____

TOTAL FILL MATERIAL TO BE IMPORTED TO THE SITE (CY) _____

TOTAL DRIVEWAY/ROADWAY MATERIAL (CY) _____

TOTAL ONSITE CUT TO FILL (CY) _____

• **UTILITIES SERVING SITE**

WATER: PUBLIC PRIVATE

SEWER: PUBLIC PRIVATE

• **COST**

WHAT IS TOTAL ANTICIPATED COST OF THE PROJECT (LABOR & MATERIALS) INCLUDING SITE PREPARATION & LANDSCAPING, WATER/SEWER, DRIVES & ROADWAYS, FOUNDATIONS, STRUCTURES, PLUMBING, HEATING AND ELECTRIC? \$ _____

• **OTHER PERMITS**

DO YOU HAVE SUBSURFACE WASTEWATER PERMIT? YES NOT REQUIRED

DO YOU HAVE SEWER CONNECTION PERMIT? YES NOT REQUIRED

DO YOU HAVE TREE WARDEN APPROVAL? YES NOT REQUIRED

DO YOU HAVE D.E.P. PERMIT? YES NOT REQUIRED

DO YOU HAVE ENTRANCE & EXCAVATION PERMIT? YES NOT REQUIRED WILL OBTAIN AS NEEDED

DO YOU HAVE PLUMBING PERMIT? YES NOT REQUIRED PLUMBER TO OBTAIN

• **SITE PLAN**

A SITE PLAN IS REQUIRED BY § 8.2.3 OF THE ORDINANCE; IS IT INCLUDED WITH THIS APPLICATION?

YES NO, A PLAN IS NOT INCLUDED AND I REQUEST THIS REQUIREMENT BE WAIVED BECAUSE:

• **CERTIFICATION**

I CERTIFY THAT ALL INFORMATION CONTAINED HEREIN AND ON ANY ATTACHMENTS IS TRUE AND CORRECT AND UNDERSTAND THAT ANY FALSE INFORMATION WILL INVALIDATE THE PERMIT AND STOP ALL WORK. FURTHER, IF I AM NOT THE OWNER OF RECORD, I CERTIFY THAT I AM AN AUTHORIZED AGENT OF THE OWNER.

SIGNATURE OF APPLICANT

DATE

FOR CODE ENFORCEMENT OFFICER USE

BUILDING PERMIT FEE \$ _____

DATE PAID _____

APPLICATION IS COMPLETE INCOMPLETE

APPLICATION DOES DOES NOT REQUIRE SITE PLAN APPROVAL DATE OF APPROVAL _____

APPLICATION IS APPROVED AND PERMIT # _____ ISSUED DISAPPROVED

COMMENTS: _____

CODE ENFORCEMENT OFFICER

DATE