

Town of Long Island



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BUILDING PERMIT APPLICATION# 614

LOT# 817 ZONE IR1 LOT SIZE 11000 SF STREET LOCATION 129 ATLANTIC LANE

OWNER/APPLICANT Willis & CHRISTINE SPEAR

OWNER/APPLICANT ADDRESS 28 BIRCHWOOD AVE, YARMOUTH, ME 04096

TELEPHONE HOME 207 846 9279 WORK 207 907 8108 CELL 207 807 7938

CONTRACTOR BILL CRONE

ADDRESS 629 FERN AVE, LONG ISLAND, ME 04050

TELEPHONE WORK _____ CELL 207 671 0608 JOB SITE _____

EMAIL _____

APPLICATION TYPE

____ NEW PRINCIPAL STRUCTURE ____ ADDITION ____ RELOCATION
____ NEW ACCESSORY STRUCTURE ____ ALTERATION ____ REPLACEMENT
____ REPAIR WE ARE HOPING TO ADD A ROOF TO THE DECK.

PROJECT DESCRIPTION (BRIEF EXPLANATION OF WORK TO BE DONE):

WE WANT TO ADD A ROOF TO THE DECK. THIS ROOF WILL STAY WITHIN BOUNDS OF EXISTING DECK.

DIMENSIONS OF PROPOSED STRUCTURE _____

PROPOSED FOUNDATION TYPE: N/A

____ FULL 10' ____ FULL 8' ____ 4' FROST WALL ____ PIER ____ SLAB

SETBACKS OF PROPOSED STRUCTURES (MUST BE SHOWN ON "REQUIRED" SITE PLAN)

FRONT 30 FT SIDES 20 FT/ 20 FT REAR 30 FT

WE RECENTLY PURCHASED ADJOINING LOT # 818 100' x 110' (11,000 SF)

BUILDING HEIGHT

THE VERTICAL DISTANCE FROM THE AVERAGE ORIGINAL GRADE TO THE TOP OF THE HIGHEST ROOF BEAMS OF A FLAT ROOF, OR TO THE MEAN LEVEL OF THE HIGHEST GABLE OR SLOPE OF GABLE OR HIP ROOF. (MAX 35' ALLOWED)

EXISTING STRUCTURES _____ FT

PROPOSED STRUCTURES _____ FT

FOR STRUCTURES TO BE OCCUPIED OR FOR AN INCREASE IN THE # OF BEDROOMS TO BE SERVICED BY PRIVATE SEPTIC SYSTEM:

OF EXISTING BEDROOMS _____ # OF ADDITIONAL BEDROOMS _____

CEO PERMIT CHECKLIST:

SEASONAL CONVERSION _____ YES _____ NO
SEPTIC REVIEW NEEDED _____ YES _____ NO
SEPTIC DESIGN NEEDED _____ YES _____ NO
EXISTING LOT COVERAGE _____ OVER ON COVERAGE _____ YES _____ NO

NO BUILDING HEREAFTER ERECTED SHALL BE OCCUPIED OR USED, IN WHOLE OR IN PART, UNTIL A CERTIFICATE OF OCCUPANCY SHALL HAVE BEEN ISSUED BY THE CODE ENFORCEMENT OFFICER.

MINIMUM OF THREE INSPECTION REQUIRED FOR ALL CONSTRUCTION WORK.

1. FOUNDATIONS (FOOTINGS, WALLS, DRAINAGE, WATER PLUG)
2. FRAMING (PRIOR TO COVERING STRUCTURAL MEMBERS)
3. FINAL INSPECTION BEFORE OCCUPANCY

SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING AND SHORELAND CONSTRUCTION MAY REQUIRE MAINE DEP PERMIT

THIS PERMIT APPLICATION DOES NOT PRECLUDE THE APPLICANT(S) FROM MEETING APPLICABLE STATE AND FEDERAL RULES.


THIS PERMIT WILL BE COME NULL AND VOID IF CONSTRUCTION IS NOT STARTED WITHIN SIX MONTHS OF PERMIT ISSUE DATE.


I HEREBY CERTIFY THAT I AM THE OWNER OF RECORD OF THE NAMED PROPERTY, OR THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS THEIR AGENT. I AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THIS JURISDICTION. IN ADDITION, IF THIS PERMIT IS ISSUED, I CERTIFY THAT THE CODE OFFICIAL OR HIS REPRESENTATIVE SHALL HAVE THE AUTHORITY TO ENTER ALL AREAS COVERED BY SUCH PERMIT AT ANY REASONABLE HOUR FOR THE PURPOSES OF INSPECTING SAID WORK.

PRINTED NAME Willis M Spear Jr OWNER/AUTHORIZED AGENTSIGNED Willis and Christine Spear DATE 5-13-21

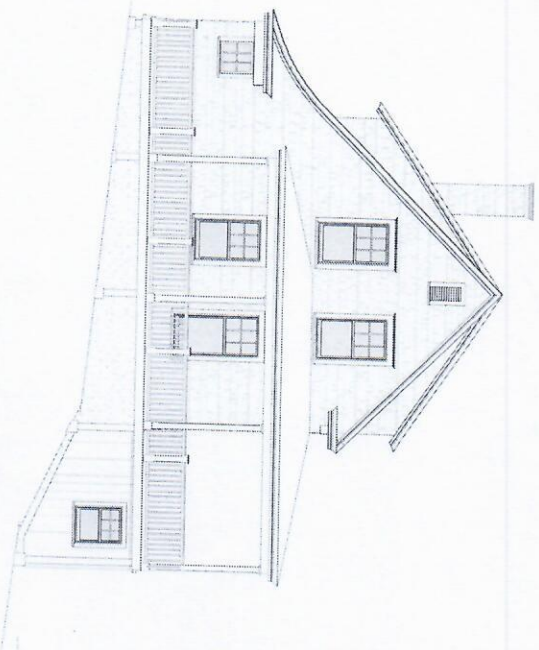
OWNER / AUTHORIZED AGENT

APPROVED BY CODE ENFORCEMENT OFFICER Stucky YES NOSIGNED [Signature] DATE 5/21/21ESTIMATED COST INCLUDING MATERIALS & LABOR \$ 10,000.00PERMIT FEE: 8400
(SEE PAGE 4 FOR PERMIT FEE SCHEDULE)PAID: CASH _____ CHECK# 478

ROOF PITCH OF SL. PORCHES: 2 3/4"  12

ROOF PITCH OF 100' PORCHES: 2 1/4"  12

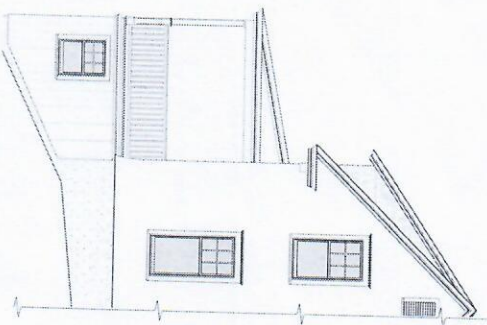




WEST ELEVATION
1/4"=1'-0"



SOUTH ELEVATION
1/4"=1'-0"



EAST ELEV PORCH
1/4"=1'-0"

Willis & Christine Spear
Cottage, Long Island Maine

DATE: 5/16/2011
SCALE: AS NOTED

WALTMAN
ARCHITECTURAL DESIGN

A11

ASB



WALTMAN
ARCHITECTURAL DESIGN

RESIDENTIAL DESIGN • COMMERCIAL DESIGN • INTERIOR DESIGN
ARCHITECTURAL RENDERING • EXTERIOR DESIGN • LANDSCAPE DESIGN
PHOTOGRAPHY • VIDEO • 3D RENDERING • 3D MODELING