

# Town of Long Island



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BUILDING PERMIT APPLICATION# 617

LOT# 422 ZONE 1R1 LOT SIZE 25,515 STREET LOCATION 149 Fern

OWNER/APPLICANT Towanda Brown

OWNER/APPLICANT ADDRESS 149 Fern Ave LI Me 04050

TELEPHONE HOME 207-766-3695 WORK \_\_\_\_\_ CELL 239-6535

CONTRACTOR Self / Brad Brad /

ADDRESS \_\_\_\_\_

TELEPHONE WORK \_\_\_\_\_ CELL \_\_\_\_\_ JOB SITE \_\_\_\_\_

EMAIL \_\_\_\_\_

## APPLICATION TYPE

\_\_\_\_ NEW PRINCIPAL STRUCTURE \_\_\_\_\_ ADDITION \_\_\_\_\_ RELOCATION

\_\_\_\_ NEW ACCESSORY STRUCTURE \_\_\_\_\_ ALTERATION ☒ REPLACEMENT

\_\_\_\_ REPAIR

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

Replacement of existing shed from 8x8 to 10x12'

DIMENSIONS OF PROPOSED STRUCTURE 10'x12'

## PROPOSED FOUNDATION TYPE:

\_\_\_\_ FULL 10' \_\_\_\_ FULL 8' Cement Block \_\_\_\_ 4' FROST WALL \_\_\_\_ PIER \_\_\_\_ SLAB

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

FRONT \_\_\_\_ FT SIDES 20' FT/ \_\_\_\_ FT REAR \_\_\_\_ FT



**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 7 FTPROPOSED STRUCTURES 8 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	<u>✓</u> NO
SEPTIC REVIEW NEEDED	_____ YES	<u>✓</u> NO
SEPTIC DESIGN NEEDED	_____ YES	<u>✓</u> NO
EXISTING LOT COVERAGE	_____ OVER ON COVERAGE	_____ YES <u>✓</u> 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 Tawanda Brown OWNER/AUTHORIZED AGENTSIGNED Tawanda Brown DATE \_\_\_\_\_  
OWNER / AUTHORIZED AGENTAPPROVED BY CODE ENFORCEMENT OFFICER 6/11/21 YES \_\_\_\_\_ NOSIGNED [Signature] DATE \_\_\_\_\_ESTIMATED COST INCLUDING MATERIALS & LABOR \$ 450<sup>00</sup> + 250<sup>00</sup> materials / labor 700<sup>00</sup>PERMIT FEE: 30.00  
(SEE PAGE 4 FOR PERMIT FEE SCHEDULE)PAID: CASH \_\_\_\_\_ CHECK# 571



**APPLICATIONS FOR PERMITS MUST BE ACCOMPANIED BY THE FOLLOWING:**

A site plan drawn to an indicated scale and showing the location and dimensions of all buildings to be erected, the sewage disposal system, driveways and turnarounds, and abutting lot and street lines. The site plan shall accurately represent the relationship between any proposed building or structure or addition to an existing building and all property lines to demonstrate compliance with setback requirements of the Ordinance. If there is any doubt as to the location of a property line on the ground or if the Code Enforcement Officer cannot confirm that all setback requirements are met from the information provided, the Code Enforcement Officer may require the applicant to provide a boundary survey or mortgage inspection plan.

**SITE PLAN**

