Town of Long Island



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BUILDING PERMIT APPLICATION# 43

LOT# 515 ZONE IR1 LOT S	IZE 1.57AC STREET	LOCATION 510	Island Avenue
SLZ OWNER/APPLICANT	This Must Be The I	Place, LLC	
OWNER/APPICANT ADDRESS	510 Island Avenu	ie, Long Island,	ME 04050
TELEPHONE HOME	WORK	CELL_	207-274-1547
CONTRACTOR Project Man	agement, Inc		
ADDRESS 121 Cassidy Po	oint Drive Portland,	ME 04102	
TELEPHONE WORK	CELL 207-27	'4-1547 JOB SI	TE
EMAIL_chagge@mac.com			
APPLICATION TYPENEW PRINCIPAL STRUCT	TURE X AD	DITION _	RELOCATION
NEW ACCESSORY STRU	CTUREAL	TERATION _	REPLACEMEN
REPAIR			
PROJECT DESCRIPTION (BRIE Bedroom expansion: The pa 12' x 18' 1st floor addition house.	lan is to enlarge an	existing quest k	pedroom into
DIMENSIONS OF PROPOSED S	STRUCTURE 12' L	oy 18', 216SF	
PROPOSED FOUNDATION TYPEFULL 10'FULL	PE: 8'4' FROS	T WALL X_F	PIERS
SETBACKS OF PROPOSED ST	RUCTURES (MUST BE	E SHOWN ON "RE	QUIRED" SITE PLA
FRONT 120'FT	SIDES 100' FT/ 10	00'FT REAF	95' FT

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THE VERTICAL DISTANCE EDOM THE AVERAGE GRIGHT
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 25'+- FT PROPOSED STRUCTURES 15'+-FT
FOR STRUCTURES TO BE OCCUPIED OR FOR AN INCREASE IN THE # OF BEDROOMS TO BE SERVICED BY PRIVATE SEPTIC SYSTEM:
OF EXISTING BEDROOMS 3 # OF ADDITIONAL BEDROOMS 0
CEO PERMIT CHECKLIST: SEASONAL CONVERSIONYESX_NO SEPTIC REVIEW NEEDEDYESX_NO SEPTIC DESIGN NEEDEDYESX_NO EXISTING LOT COVERAGEYESX_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 Cyrus Y. Hagge OWNER/AUTHORIZED AGENT
SIGNED DATE 11-12-21 OWNER / AUTHORIZED AGENT
APPROVED BY CODE ENFORCEMENT OFFICER YES NO
SIGNED DATE 11/19/21
ESTIMATED COST INCLUDING MATERIALS & LABOR \$ \$25,000
PERMIT FEE: 64.80 PAID: CASH CHECK# 1087
(SEE PAGE 4 FOR PERMIT FEE SCHEDULE)

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