

FOR OFFICE USE ONLY:

PERMIT NO: _____

ISSUE DATE: _____

FEE AMOUNT: _____

APPROVED BY: _____

TOWN OF PHILLIPS

BUILDING OR USE PERMIT APPLICATION

GENERAL INFORMATION

1. APPLICANT:	2. APPLICANT MAILING ADDRESS:	3. APPLICANT PHONE & EMAIL:
4. PROPERTY OWNER:	5. PROPERTY OWNER ADDRESS:	6. PROPERTY OWNER PHONE & EMAIL:
7. CONTRACTOR:	8. CONTRACTOR ADDRESS:	9. CONTRACTOR PHONE:
10. PHYSICAL ADDRESS OF PROPERTY:	11. TAX MAP & LOT:	12. DEED BOOK & PAGE: ATTACH PROOF OF RIGHT, TITLE OR INTEREST FOR PROPERTY
13. PROPOSED USE: LAND USE NUMBER(S): (From Table Of Land Uses) CHANGE OF USE? <input type="checkbox"/>	14. COST OF CONSTRUCTION IF THE BUILDING IS A RECONSTRUCTION PROJECT OR LOCATED IN THE FLOOD HAZARD AREA:	15. PROJECT DESCRIPTION:
16. PROPERTY IS ZONED AS: GENERAL PURPOSE <input type="checkbox"/> LIMITED RESIDENTIAL <input type="checkbox"/> RESOURCE PROTECTION <input type="checkbox"/> RURAL <input type="checkbox"/> SPECIAL FLOOD HAZARD AREA <input type="checkbox"/> (Additional application form required)		

BUILDING INFORMATION

17. NUMBER OF STORIES: PRESENT: _____ PROPOSED: _____ TOTAL: _____	18. HEIGHT OF BUILDINGS: PRESENT: _____ ft. PROPOSED: _____ ft. TOTAL: _____ ft.	19. NUMBER OF BATHROOMS: PRESENT: _____ PROPOSED: _____ TOTAL: _____
20. NUMBER OF BEDROOMS: PRESENT: _____ PROPOSED: _____ TOTAL: _____	21. PRESENT SEPTIC SYSTEM IS APPROVED FOR _____ BEDROOMS	22. YEAR-ROUND USE <input type="checkbox"/> SEASONAL USE <input type="checkbox"/>
23. HISTORICAL BUILDING: YES <input type="checkbox"/> NO <input type="checkbox"/>		
24. TYPE OF WATER SUPPLY PRIVATE <input type="checkbox"/> PUBLIC <input type="checkbox"/> _____ WATER DISTRICT OFFICE MANAGER _____ DATE _____		
25. SEWAGE DISPOSAL SYSTEM - DATE OF INSTALLATION: _____ DATE		

PROPERTY INFORMATION

26. STREET FRONTAGE _____ ft WATER FRONTAGE _____ ft Nonconforming <input type="checkbox"/>	27. MORE THAN ONE USE EXISTING ON THE PROPERTY, ACCESSORY USE: _____ Nonconforming <input type="checkbox"/>
28. SUBDIVISION: YES <input type="checkbox"/> NO <input type="checkbox"/> Name and date of approval: _____ _____	29. SETBACKS: _____ Front Side Rear Water Nonconforming <input type="checkbox"/>
30. HOW MANY DWELLING UNITS ARE PRESENTLY ON THE LOT? _____	31. LOT SIZE (IN SQ. FT. OR ACRES) _____ Nonconforming <input type="checkbox"/>
32. TOTAL SQ. FT. OF ALL BUILDINGS: PRESENT: _____ PROPOSED: _____ TOTAL: _____	33. LOT COVERAGE (IN PERCENT) PRESENT: _____ PROPOSED: _____ ZONE %: _____ Nonconforming <input type="checkbox"/>
34. NUMBER OF OFF STREET PARKING SPACES: PRESENT _____ PROPOSED _____	

35. ADDITIONAL PERMITS, APPROVALS & INSPECTIONS REQUIRED:

- PLANNING BOARD - CONDITIONAL USE
- SEPTIC/HHE 200
- PLUMBING
- ARMY CORPS OF ENG.
- DEP
- EPA
- FIRE MARSHALL
- MDOT DRIVEWAY ENTRANCE
- OTHER _____

36. ANY FALSE INFORMATION MAY INVALIDATE A PERMIT. SIGNING AUTHORIZES INSPECTIONS NECESSARY TO ISSUE PERMIT AND ENSURE COMPLIANCE WITH REGULATIONS.

I CERTIFY THAT ALL INFORMATION GIVEN IN THIS APPLICATION IS ACCURATE:

APPLICANT/AGENT

DATE

PLEASE ATTACH A PLAN OF THE PROJECT. THE PLAN SHOULD BE DRAWN TO SCALE, WITH A NORTH ARROW AND SHOW THE FOLLOWING:

EXISTING AND PROPOSED STRUCTURES WITH SETBACKS FROM ROAD CENTER LINE(S), PROPERTY BOUNDARIES, AND WATERBODIES (STREAMS, PONDS, WETLANDS);

ANY KNOWN EASEMENTS THAT ARE ON THE PROPERTY;

AREAS TO BE CLEARED, GRADED, FILLED OR EXCAVATED.