

**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:<br><br><b>ATTACH PROOF OF RIGHT, TITLE OR INTEREST FOR PROPERTY</b> |
| 13. PROPOSED USE:<br><br>LAND USE NUMBER(S):<br>(From Table Of Land Uses)<br><br>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:<br><b>GENERAL PURPOSE</b> <input type="checkbox"/><br><b>LIMITED RESIDENTIAL</b> <input type="checkbox"/><br><b>RESOURCE PROTECTION</b> <input type="checkbox"/><br><b>RURAL</b> <input type="checkbox"/><br><b>SPECIAL FLOOD HAZARD AREA</b> <input type="checkbox"/><br>(Additional application form required) |                                                                                                           |                                                                                           |

### BUILDING INFORMATION

|                                                                                                                                                                                                                                                             |                                                                                           |                                                                                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|
| 17. NUMBER OF STORIES:<br>PRESENT: _____<br>PROPOSED: _____<br>TOTAL: _____                                                                                                                                                                                 | 18. HEIGHT OF BUILDINGS:<br>PRESENT: _____ ft.<br>PROPOSED: _____ ft.<br>TOTAL: _____ ft. | 19. NUMBER OF BATHROOMS:<br>PRESENT: _____<br>PROPOSED: _____<br>TOTAL: _____        |
| 20. NUMBER OF BEDROOMS:<br>PRESENT: _____<br>PROPOSED: _____<br>TOTAL: _____                                                                                                                                                                                | 21. PRESENT SEPTIC SYSTEM<br>IS APPROVED FOR<br>_____ BEDROOMS                            | 22. YEAR-ROUND USE <input type="checkbox"/><br>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"/><br><div style="display: flex; justify-content: space-between; margin-top: 10px;"> <span>_____ WATER DISTRICT OFFICE MANAGER</span> <span>_____ DATE</span> </div> |                                                                                           |                                                                                      |
| 25. SEWAGE DISPOSAL SYSTEM - DATE OF INSTALLATION:<br><div style="text-align: center; margin-top: 10px;">           _____<br/>           DATE         </div>                                                                                                |                                                                                           |                                                                                      |

### PROPERTY INFORMATION

|                                                                                                                           |                                                                                                                                                                                                                                                |
|---------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 26. STREET FRONTAGE _____ ft<br>WATER FRONTAGE _____ ft<br>Nonconforming <input type="checkbox"/>                         | 27. MORE THAN ONE USE EXISTING ON THE<br>PROPERTY, ACCESSORY USE:<br>_____<br>Nonconforming <input type="checkbox"/>                                                                                                                           |
| 28. SUBDIVISION: YES <input type="checkbox"/> NO <input type="checkbox"/><br>Name and date of approval:<br>_____<br>_____ | 29. SETBACKS:<br><div style="display: flex; justify-content: space-around; margin-top: 10px;"> <span>_____ Front</span> <span>_____ Side</span> <span>_____ Rear</span> <span>_____ Water</span> </div> Nonconforming <input type="checkbox"/> |
| 30. HOW MANY DWELLING UNITS ARE<br>PRESENTLY ON THE LOT?<br>_____                                                         | 31. LOT SIZE (IN SQ. FT. OR ACRES)<br>_____<br>Nonconforming <input type="checkbox"/>                                                                                                                                                          |
| 32. TOTAL SQ. FT. OF ALL BUILDINGS:<br>PRESENT: _____<br>PROPOSED: _____<br>TOTAL: _____                                  | 33. LOT COVERAGE (IN PERCENT)<br>PRESENT: _____<br>PROPOSED: _____<br>ZONE %: _____<br>Nonconforming <input type="checkbox"/>                                                                                                                  |
| 34. NUMBER OF OFF STREET PARKING SPACES:<br>PRESENT _____<br>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.