

TOWN OF KITTERY BUILDING PERMIT APPLICATION

MAP _____ LOT _____ DATE _____ PERMIT # _____

Name of Property Owner _____ Name of Contractor _____
Address _____ Address _____
Property Location _____ Phone # _____
Phone # _____

Type of Work: _____ Type of Occupancy: _____
() New () Demolition
() Addition () Moving
() Renovation () Commercial Refit
() Electrical/New Svc.s () Accessory Building

Existing Use _____ Zoning District _____

LOT INFORMATION: _____
Lot Area _____ S.F./Acre _____
Lot Frontage _____ ft.
Number of dwelling Units on Property _____ ft.
Water Frontage () Yes () No _____ ft.
Flood Hazard Area () Yes () No _____ ft.

BUILDING INFORMATION: _____
Building Height: _____ Present
(Stories) _____ Proposed
Number of Bedrooms: _____ Present
_____ Proposed
Number of Bathrooms: _____ Present
_____ Proposed
Full | Half
Air Conditioning: () Unit () Central
Heating System Type: _____
Fuel Type: _____
Chimney _____

Water Supply: _____ Public
_____ Private
Sewage Disposal: _____ Public
_____ Private
If Septic System, Designed for _____ Bedrooms
Insulation: _____
Finished Flooring: _____
Interior Walls: _____
Exterior Walls: _____
() Pool - Size: _____

PROJECT DESCRIPTION AND DIMENSIONS:

Will your project create one acre or more of disturbed area? _____
Note: if your project creates one acre or more of disturbed area, you will be required to file with the DEP a notice of intent to comply with the MAINE CONSTRUCTION GENERAL PERMIT.

ESTIMATED COST: _____ (Fair Market Value of Material and LABOR)

A plot plan, showing the location of all existing and proposed structures, parking areas, septic system, and distance to property lines and wetlands from building shall accompany this application. Also include two sets of building plans showing the elevation and floor plan. Permit expires if work is not started within 6 months and finished within two years.

I certify that the above information is correct to the best of my knowledge. I will notify CEO of any changes.

Signature of Applicant _____
Signature of Property Owner _____

() Granted, fee _____
() Denied, Reason _____
Date _____

CODE ENFORCEMENT OFFICER