

# Town of Arrowsic

## BUILDING PERMIT APPLICATION

FOR CEO USE

Rcvd \_\_\_\_\_ App # \_\_\_\_\_

Fee \_\_\_\_\_ Issd \_\_\_\_\_

### A. General Information

1. Applicant(s): \_\_\_\_\_

Contact Info: tel: \_\_\_\_\_ email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

2. Property Owner: (if different from Applicant) \_\_\_\_\_

Contact Info: tel: \_\_\_\_\_ email: \_\_\_\_\_

**Note: If applicant is not property owner, include letter of authorization from owner.**

3. Property Location: (Number and Road) \_\_\_\_\_

4. Zoning : (See Zoning Map at Town Hall)

\_\_\_ Rural Residential I District (RR I) **OR** \_\_\_ Rural Residential II District (RR II)

5. District Overlay: See Zoning Ordinance Section 2.2 for description (check all that apply:)

\_\_\_ Shoreland Zoning District **AND** \_\_\_ Resource Protection District **AND**

\_\_\_ FEMA Flood Zone (see Flood Insurance Rate Map)

6. This application is for: (check all that apply)

Principal Structure

Accessory Structure

Addition

Reconstruction or Replacement

Pier, Dock, Wharf or Float

Private Campsite

Other: \_\_\_\_\_

#### Proposed Use:

\_\_\_\_\_  
(residence, garage, workshop, camp, etc.)

### B. Property Information

ArrowsicTax Map/Lot No.: \_\_\_\_/\_\_\_\_

Lot size: \_\_\_\_\_ acres Year Property Created (only if after 1995) \_\_\_\_\_

Are any abutting properties under same ownership? \_\_\_no \_\_\_yes If yes, Map/Lot # \_\_\_\_/\_\_\_\_

Part of a subdivision? \_\_\_no, \_\_\_don't know \_\_\_yes, subdivision name: \_\_\_\_\_

Does the property border or contain any streams, wetland, ponds, or tidal waters \_\_\_ yes \_\_\_ no

A home business is currently, or will be, conducted at this location. \_\_\_ yes, \_\_\_no

### C. Certification

I certify that the information submitted is correct to the best of my knowledge, that I am familiar with the Arrowsic Zoning Ordinance rules that apply to this proposal and I agree to allow inspections on the property by the Codes Enforcement Officer at reasonable hours.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

**D. Septic System** (Fill in only those items that apply to your proposal or "N/A" if not applicable)

1. Septic system: \_\_\_\_ new or expansion, \_\_\_\_ existing      Installed in \_\_\_\_\_ (yr.) or, \_\_\_\_ unknown
2. Septic system designed for how many bedrooms? \_\_\_\_\_ or, Permit # \_\_\_\_\_ or, \_\_\_\_ don't know
3. Existing Structure location is \_\_\_\_ conforming, \_\_\_\_ nonconforming,, or \_\_\_\_ don't know

**E. Structure Details** (provide size or area as applicable):

	Proposed	Existing
Basement (raw)	____'-____" x ____'-____" or _____ sq. ft.	____'-____" x ____'-____" or _____ sq. ft.
Bsmnt. (finished)	____'-____" x ____'-____" or _____ sq. ft.	____'-____" x ____'-____" or _____ sq. ft.
1st Floor	____'-____" x ____'-____" or _____ sq. ft.	____'-____" x ____'-____" or _____ sq. ft.
2nd Floor	____'-____" x ____'-____" or _____ sq. ft.	____'-____" x ____'-____" or _____ sq. ft.
3rd Floor	____'-____" x ____'-____" or _____ sq. ft.	____'-____" x ____'-____" or _____ sq. ft.
Deck/Porch	____'-____" x ____'-____" or _____ sq. ft.	____'-____" x ____'-____" or _____ sq. ft.
Patio/Pool	____'-____" x ____'-____" or _____ sq. ft.	____'-____" x ____'-____" or _____ sq. ft.
Garage (ground)	____'-____" x ____'-____" or _____ sq. ft.	____'-____" x ____'-____" or _____ sq. ft.
Garage (upper )	____'-____" x ____'-____" or _____ sq. ft.	____'-____" x ____'-____" or _____ sq. ft.

	Existing	Proposed
Number of Bedrooms:	_____	_____
Number of Bathrooms:	_____	_____
Number of Kitchens:	_____	_____

**Pier, Dock, Bridge or Float:**  
 Provide drawings of proposed structure  
 Permanent water-related uses require an  
 approved DEP Permit.

Structure Height (from average original grade to highest part of structure): \_\_\_\_\_ft. \_\_\_\_ inches

**F. Tree Cutting and Clearing for Development**

Cutting and clearing restrictions apply along all roads and in the Shoreland Zone.

Tree Cutting \_\_\_\_will or \_\_\_\_will not be a part of this proposed land use.

**G. Erosion and Sedimentation Control**

All activities which involve filling, grading, excavation or other similar activities which result in unsta-  
 bilized soil conditions require a soil erosion and sedimentation control plan. The applicant's signature on  
 this form signifies his/her understanding of these requirements as described in Arrowsic Zoning Ordinance  
 Section 3.23. See handout entitled: Erosion Control For Homeowners

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date