



Code Enforcement Office
 48 Morton Ave., Dover-Foxcroft,
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 Fax: (207) 564-3621
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ddow@dover-foxcroft.org
www.dover-foxcroft.org

Office Hours
 Monday 8:00 AM–4:00 PM
 Tuesday Closed
 Wednesday 8:00 AM–4PM
 Thursday 8:00 AM–4:00PM
 Friday 8:00 AM–4:00 PM

LAND USE AND MULTI-PURPOSE PERMIT APPLICATION

	Applicant	Owner (<input type="checkbox"/> Same as Applicant)	Third Party Inspector
Name			
Address			
City, State, Zip			
Phone			
Email			

Application Instructions: Complete all sections of application, including any additional forms noted. The Applicant must prove that the proposed activity conforms with the Town of Dover Foxcroft Land Use Ordinance (LUO). A permit will be issued only if the application is deemed complete, has been reviewed, and fully complies with all the provisions of the LUO.

Project Description: _____

(attach additional paper if needed)

Construction Start Date _____ **Construction Finish Date** _____

PROPERTY USE TABLE (LUO 2.5.1)			PROJECT INFORMATION	
	Existing	Proposed	BUILDING: <input type="checkbox"/> COMMERCIAL (add form) BP# _____	<input type="checkbox"/> RESIDENTIAL (add form) BP# _____
Commercial	<input type="checkbox"/>	<input type="checkbox"/>	Additional- General: <input type="checkbox"/> Change of Use \$25 P# _____	<input type="checkbox"/> Fire Department (add form)
Agriculture	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Sign Permit \$15 P# _____	<input type="checkbox"/> Manufactured Home (add form)
Governmental	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Demolition \$10 P# _____	<input type="checkbox"/> Sewer & Water (add form)
Industrial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Shoreland Zoning Permit \$15 P# _____	<input type="checkbox"/> Site Plan Map (add form)
Institutional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Flood Permit \$15 P# _____	<input type="checkbox"/> Internal Plumbing (see LPI)
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Home Occupation Permit \$25 P# _____	<input type="checkbox"/> Subsurface Wastewater (see LPI)
Rural	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Site Plan Review \$55/\$110/\$250	<input type="checkbox"/> DOT Highway Opening (add form)
Residential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Ad Reimbursement \$ _____	<input type="checkbox"/> Chicken Permit \$10 _____
Outdoor Rec.	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> B/P Renewal \$10 _____
Natural Res.	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Knox Box \$235.48

Right, Title and Interest. Attach a copy of the deed to the property, an option to purchase the property, a lease agreement, or other documentation to demonstrate right, title or interest in the property on the part of the Applicant. If Applicant is not owner, also attach authorizing letter from the property owner.

Total Due: \$ _____

By signing below, I agree that the information provided is complete and correct and that my project will adhere to applicable State and Town land use laws and regulations. I agree to future inspections by the Code Enforcement Officer at reasonable hours.

Applicant Signature _____

Date _____

CEO Signature _____

Date _____

Date Received: _____

(Form created 8/16/2019)

Property Address: _____

Tax Map & Lot #: _____

Zoning District: - _____

SITE PLAN FOR PERMIT APPLICATION

Attach or draw below, a site plan showing size, location and proposed structures, sewage disposal facilities, water supply facilities, stormwater facilities, electrical facilities, telecommunication facilities, direction of surface water drainage and areas to be cut and filled. Include lot dimensions, property boundaries, distances of structures from boundaries, distances from high water marks on brooks, streams, ponds, lakes, rivers, wetlands. Show location of any fire hydrants, gas mains, signs, exterior lighting, landscaping and buffering. Show location, dimensions and materials of driveway, parking areas, sidewalks and street openings. Show flow of vehicular and pedestrian traffic into and through the property. Identify established street(s) and intersecting roads. Give distance to/from property line pins to road openings and distance to/from openings to nearest intersecting road.

Scale: _____ = _____ feet

STREET FRONTAGE: _____ FT SHORE FRONTAGE: _____ FT LOT SIZE: _____ S.F. ACRES _____

SETBACKS - NUMBER OF FEET TO PROPOSED STRUCTURE FROM PROPERTY LINES:

_____ FRONT _____ REAR _____ LEFT SIDE _____ RIGHT SIDE

% LOT COVERAGE: MAXIMUM ALLOWED _____ EXISTING: _____ PROPOSED _____

Note: Submission requirements may be waived in accordance with the LUO Section 5.8.3.

Date Received: _____

(Form created 8/16/2019)

Property Address: _____

Tax Map & Lot #: _____

Zoning District: _____

RESIDENTIAL BUILDING PERMIT APPLICATION

CONTRACTORS:

BUILDER: _____ **CONTACT:** _____

PLUMBING: _____ **CONTACT:** _____

SITWORK: _____ **CONTACT:** _____

WORK TYPE: () ABANDON () ADDITION () MOVE () NEW () REMODEL () REPAIR () REPLACE
() TEMPORARY

BUILDING TYPE: () HOUSE () DECK () ACCESSORY SHED () GARAGE
() POOL () INTERIOR () WINDOWS () FOUNDATION () DOORS

() OTHER _____

ENCLOSED: () FLOOR PLAN () ELEVATION PLAN () CONSTRUCTION SPECS () SURVEY

BUILDING/STRUCTURE SIZE: LENGTH _____ FT X WIDTH _____ FT SQ FT: _____

BUILDING/STRUCTURE HEIGHT: FEET _____ FT STORIES _____

FOUNDATION: () CONCRETE () STONE () BLOCK () WOOD () OTHER _____

DESCRIBE: _____

FLOOR CONSTRUCTION: () WOOD () STEEL () TRUSS () OTHER _____

DESCRIBE: _____

WALL CONSTRUCTION: () WOOD () STEEL () BLOCKS () OTHER _____

DESCRIBE: _____

SIDING: () REPAIR () REPLACE () ALUMINUM () STEEL () VINYL () WOOD () OTHER

DESCRIBE: _____

WINDOW(S): () NEW () REPLACEMENT

SIZE/LOCATION: _____

DOOR(S): () NEW () REPLACEMENT

SIZE/LOCATION: _____

ROOF CONSTRUCTION: () REPAIR () REPLACE () TRUSS () RAFTER () OTHER _____

DESCRIBE: _____

TYPE OF HEAT/FUEL/UTILITIES: _____

ELECTRICAL: _____

POOL: DIAMETER _____ FT DEPTH _____ FT () INGROUND () ABOVE GROUND

RESIDENTIAL BUILDING PERMIT FEES

- | | |
|---|---|
| <input type="checkbox"/> 1-100 square feet - \$15 | <input type="checkbox"/> 1001-2000 square feet - \$100 |
| <input type="checkbox"/> 101-500 square feet - \$30 | <input type="checkbox"/> 2001-4000 square feet - \$250 |
| <input type="checkbox"/> 501-1000 square feet - \$55 | <input type="checkbox"/> 4001 square feet and greater - \$500 |
| <input type="checkbox"/> After-the-Fact Permits: Fees Doubled | |

Building Permit # _____

TOTAL DUE: _____

Please call Brian Gaudet C.E.O @ 207-717-3186 to set up an appointment for Approval of Permit

Date Received: _____

(Form created 8/16/2019)

Property Address: _____

Tax Map & Lot #: _____

Zoning District: _____