

# Town of Wayne

P.O. Box 400; 48 Pond Road

Wayne, ME 04284

Phone: (207) 685-4983 Fax: (207) 685-3836

<http://www.waynemaine.org>

## Building Permit Application

Applicant \_\_\_\_\_ Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email Address \_\_\_\_\_

Property Owner \_\_\_\_\_ Mailing Address \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email Address \_\_\_\_\_

### Property Information

Property Location \_\_\_\_\_ Map \_\_\_\_\_ Lot \_\_\_\_\_

Zone \_\_\_\_\_ Property Frontage \_\_\_\_\_ Lot Area \_\_\_\_\_

Water Frontage \_\_\_\_\_ Name of Water Body \_\_\_\_\_

Distance of existing or proposed structure from water body high water mark \_\_\_\_\_

Land Use Existing \_\_\_\_\_ Proposed \_\_\_\_\_

### Project Description (Include dimensions and description of all stories and parts)

Will height of building change? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes indicate Current height to roof peak \_\_\_\_\_ Proposed height roof peak \_\_\_\_\_

Estimated Cost of Project \_\_\_\_\_

Are you proposing to add any bedrooms to this structure? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, indicate amount of bedrooms \_\_\_\_\_ Existing \_\_\_\_\_ Proposed

Will excavation or soil disturbance occur? \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes indicate proposed erosion control measures that will be implemented prior to beginning work.

**This application must be accompanied by a site plan showing all of the setbacks to the front, sides, and rear of property lines, water bodies, and/or wetlands.**

Setbacks \_\_\_\_\_ Road \_\_\_\_\_ Side \_\_\_\_\_ Rear \_\_\_\_\_ Water \_\_\_\_\_ Wetland

**By signature of this application I verify that this application is accurate to the best of my knowledge. I hereby grant permission to the CEO to enter my property after notification at reasonable hours.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**Office Use Only**

Structure Type \_\_\_\_\_ Conforming  
\_\_\_\_\_ Non-conforming due to failure to meet \_\_\_\_\_

Lot Coverage Structures Existing \_\_\_\_\_ Proposed \_\_\_\_\_

Other Impervious areas Existing \_\_\_\_\_ Proposed \_\_\_\_\_

Total

\_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Refer to Planning Board

If not approved give reason \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Fee \_\_\_\_\_ Paid (date) \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_  
Code Enforcement Officer