

**FOR OFFICE USE ONLY:**

PERMIT NO: \_\_\_\_\_

ISSUE DATE: \_\_\_\_\_

FEE AMOUNT: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

# TOWN OF KINGFIELD BUILDING OR USE PERMIT APPLICATION

## GENERAL INFORMATION

1. APPLICANT:	2. APPLICANT ADDRESS:	3. APPLICANT PHONE:
4. PROPERTY OWNER:	5. PROPERTY OWNER ADDRESS:	6. PROPERTY OWNER PHONE:
7. CONTRACTOR:	8. CONTRACTOR'S ADDRESS:	9. CONTRACTOR'S PHONE:
10. ADDRESS OF PROPERTY:	11. TAX MAP & LOT:	12. DEED BOOK & PAGE:
13. PROPOSED USE:	14. COST OF CONSTRUCTION:	15. PROJECT DESCRIPTION:

16. PROPERTY IS ZONED AS:

**ZONING :**

- VILLAGE
- GROWTH
- RURAL 1
- RURAL 2
- ROADWAY OVERLAY

**SHORELAND DISTRICTS:**

- GENERAL DEVELOPMENT
- LIMITED COMMERCIAL
- LIMITED RESIDENTIAL
- RESOURCE PROTECTION
- STREAM PROTECTION

**WELLHEAD-PROTECTION:**

- ZONE 1
- ZONE 2
- SPECIAL FLOOD HAZARD AREA**   
(Additional application form required)

### BUILDING INFORMATION

17. NUMBER OF STORIES: PRESENT: _____ PROPOSED: _____ TOTAL: _____	18. HEIGHT OF BUILDINGS: PRESENT: _____ ft. PROPOSED: _____ ft. TOTAL: _____ ft.	19. NUMBER OF BATHROOMS: PRESENT: _____ PROPOSED: _____ TOTAL: _____
20. NUMBER OF BEDROOMS: PRESENT: _____ PROPOSED: _____ TOTAL: _____	21. PRESENT SEPTIC SYSTEM IS APPROVED FOR _____ BEDROOMS	22. YEAR-ROUND USE <input type="checkbox"/> 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"/>  _____ WATER DISTRICT SUPERINTENDENT _____ DATE _____		
25. TYPE OF SEWAGE DISPOSAL PRIVATE <input type="checkbox"/> PUBLIC <input type="checkbox"/>  _____ SEWER DISTRICT SUPERINTENDENT _____ DATE _____		

### PROPERTY INFORMATION

26. STREET FRONTAGE _____ ft SHORELAND FRONTAGE _____ ft Nonconforming <input type="checkbox"/>	27. MORE THAN ONE USE EXISTING ON THE PROPERTY, ACCESSORY USE: _____ Nonconforming <input type="checkbox"/>
28. SUBDIVISION: YES <input type="checkbox"/> NO <input type="checkbox"/> Name and date of approval: _____ _____	29. SETBACKS: _____ Front Side Rear Nonconforming <input type="checkbox"/>
30. HOW MANY DWELLING UNITS ARE PRESENTLY ON THE LOT? _____	31. LOT SIZE (IN SQ. FT. OR ACRES) _____ Nonconforming <input type="checkbox"/>
32. TOTAL SQ. FT. OF ALL BUILDINGS: PRESENT: _____ PROPOSED: _____ TOTAL: _____	33. LOT COVERAGE (IN PERCENT) PRESENT: _____ PROPOSED: _____ ZONE %: _____  Nonconforming <input type="checkbox"/>
34. NUMBER OF OFF STREET PARKING SPACES: PRESENT _____ PROPOSED _____	

**35. ADDITIONAL PERMITS, APPROVALS & INSPECTIONS REQUIRED:**

- PLUMBING
- SEPTIC/HHE 200
- PLANNING BOARD
- 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 SITE PLAN DRAWING(S)  
SHOWING THE LOCATION OF ANY PROPOSED NEW  
CONSTRUCTION OR CHANGES TO EXISTING  
STRUCTURES IN RELATION TO PROPERTY LINES,  
ROADS, WATER BODIES AND ADJACENT BUILDINGS.**