



TOWN of SABATTUS

190 Middle Road

Sabattus, Maine 04280

Ph: (207) 375-4331 Fax: (207) 375-4104

Shore land Zoning Permit Application

You must complete a separate form for each proposed structure/change for review by the Planning Board. Applicants should review the Sabattus Shoreland Zoning Ordinance in order to make sure that their application conforms to all applicable requirements. Copies are available at the Town Office or online at www.sabattus.org.

Applicants may contact the Sabattus Code Enforcement Officer to schedule a pre-construction/activity inspection or for assistance with an application.

Lot Owners should be present during the Planning Board meeting to answer any questions pertaining to this application. If owners or their representatives are not present and the board is unable to make a clear determination, the application may be tabled until the next regular meeting.

Application Date: _____ Tax Map #: _____ Tax Lot #: _____

Property Street Address: _____

Water Body: _____

Past Permit(s) & Dates: _____

Indicate what your Shore Land Zone is (Please check only one below):

____ Resource Protection ____ Limited Residential/Recreational
____ Stream Protection ____ Limited Residential/Recreational Commercial

Owner(s) or Applicant (if different) Name: _____

Address: _____

Phone# Day: _____ Phone# Eve.: _____

E-Mail Address (optional): _____

Brief Description of Project: _____

Describe Your Lot:

Size of Lot: _____ sq/ft

Type of Road: _____ Road Frontage: _____ ft.
(Dirt, paved, town, private, state, or other)

Circle Type of Shore Frontage: Sandy, Rocky, Steep, Other (Explain) _____

Length of Shore Frontage: _____ ft.

Each Lot Line length: _____ ft _____ ft _____ ft _____ ft _____ ft _____ ft

Please Describe any EXISTING Structure(s)

Check which of the following:

Residence () Square Footage _____

Garage () Square Footage _____

Dock () Square Footage _____

Other () _____ Square Footage _____
(Explain)

Is the existing structure your Residence or Seasonal? _____

Are any of the existing structures Commercial? Yes () No ()

Circle Existing Type of Foundation:

Post Frost Walls Full Basement Slab Other _____
(Explain)

Please Describe your PROPOSED Structure/Use/Construction

(A separate application is needed for each structure)

Circle one of the following: Residence Garage Dock Other _____
(Explain)

Is the proposed structure/use Year Round or Seasonal? _____

Circle one of the following: Alteration Addition New Construction Other _____
(Explain)

Circle proposed type of foundation: Posts Frost Wall Full Basement Slab Other _____
(Explain)

Height of foundation above ground: _____ ft

Distance from Normal High Water Mark: _____ ft.

Does your structure have any new bedrooms? Yes () No ()

Describe any Proposed Septic System: _____

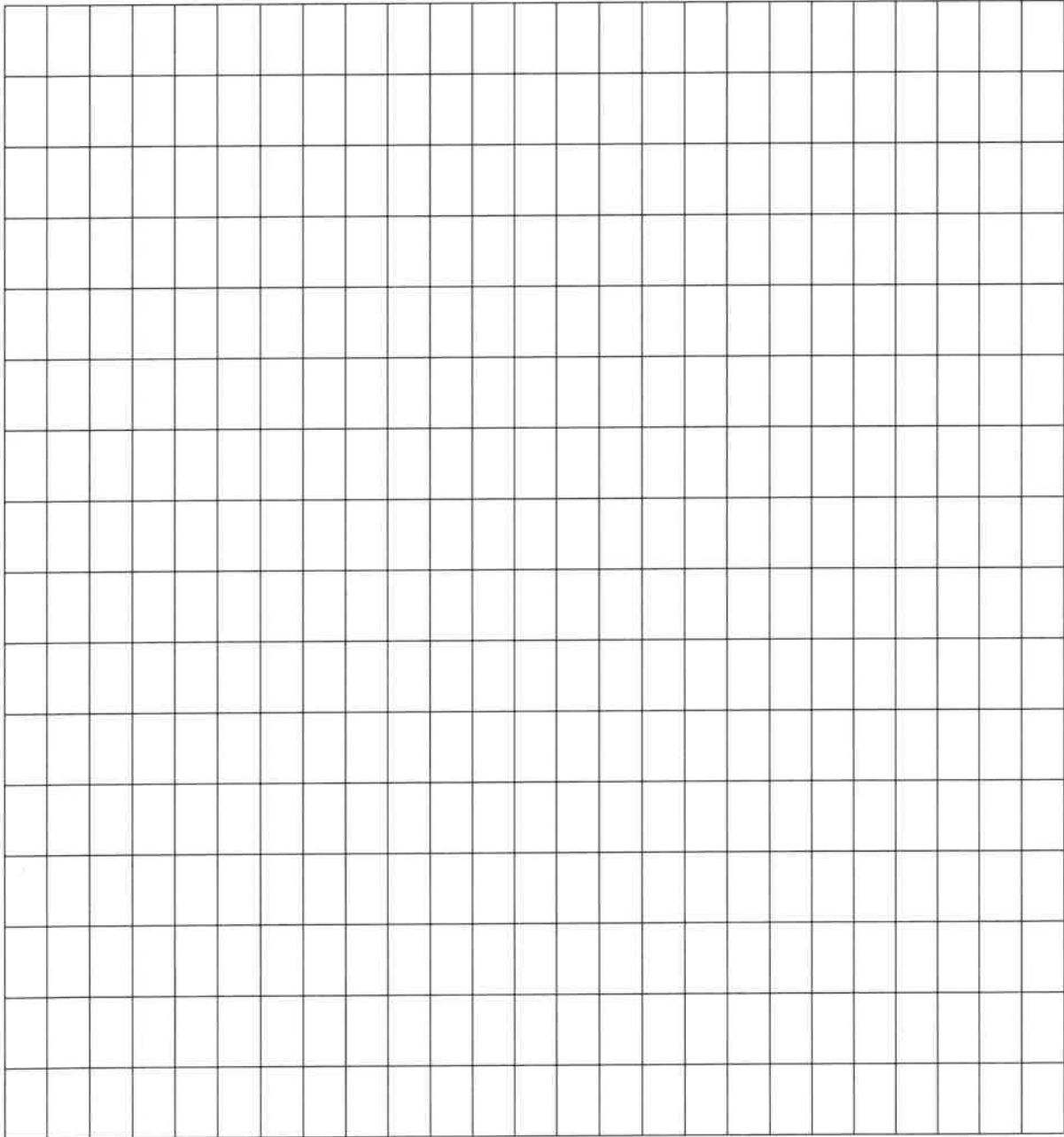
(Attach an approved soils test design)

SITE PLAN

Draw a simple sketch showing both the existing and proposed structures

INCLUDE LOT LINES; AREA TO BE CLEARED OF TREES AND OTHER VEGETATION; THE EXACT POSITION OF PROPOSED STRUCTURES, INCLUDING DECKS, PORCHES, AND OUT BUILDINGS WITH ACCURATE SETBACK DISTANCES FROM THE SHORELINE, SIDE AND REAR PROPERTY LINES; THE LOCATION OF PROPOSED WELLS, SEPTIC SYSTEMS, DRIVEWAYS, AND AREAS TO BE FILLED OR GRADED.

IF THE PROPOSAL IS FOR THE EXPANSION OF AN EXISTING STRUCTURE, PLEASE DISTINGUISH BETWEEN THE EXISTING STRUCTURE AND THE PROPOSED EXPANSION.



Front or Rear Elevation

Side Elevation

ALL APPLICATIONS FOR A PERMIT SHALL BE ACCOMPANIED BY A PLAN ACCURATELY DRAWN TO SCALE OR SHOWING ACTUAL DIMENSIONS OR DISTANCES AND SHOWING:

- 1. THE ACTUAL SHAPE AND DIMENSIONS OF THE LOT FOR WHICH A PERMIT IS SOUGHT.**
- 2. THE LOCATION AND SIZE OF ALL BUILDINGS, STRUCTURES, WATER BODIES, AND OTHER SIGNIFICANT FEATURES CURRENTLY EXISTING ON THE LOT.**
- 3. THE LOCATION AND BUILDING PLANS (Blue Prints) OF NEW BUILDINGS, STRUCTURES OR PORTIONS THEREOF TO BE CONSTRUCTED.**
- 4. THE EXISTING AND INTENDED USE OF EACH BUILDING OR STRUCTURE.**
- 5. THE TYPE OF FOUNDATION**
- 6. A LAYOUT OF ALL INTERIOR ROOMS AND INTENDED USE OF EACH ROOM.**

The undersigned is applying for a permit to build, alter, or improve structures or grounds as stated above and as depicted and described on attachments. To the best of my knowledge, all information submitted on this application and attachments are true and correct. Changes to this proposal may not be made without approval from the appropriate authority.

I AGREE TO FUTURE INSPECTIONS BY THE CODE ENFORCEMENT OFFICER AT REASONABLE HOURS.

APPLICANT'S SIGNATURE

DATE

AGENT'S SIGNATURE if applicable)

DATE

For Assistance with applications contact the Code Enforcement Officer, by calling 207-751-6778.

FOR OFFICE USE ONLY (do not write below this line)

Approved _____

Denied _____

Pending _____

CEO _____
(Signature) (Date)

Planning Board Chair _____
(Signature) (Date)

DEP Notification Advised: () Yes () No Shore Land Zone Permit # _____

DEP Permit by Rule # & Date (If required) _____

