



BUILDING PERMIT APPLICATION TOWN OF GRAY MAINE

For Office Use Only

Permit No: _____

Date Submitted: _____

Date Paid: _____

PERMIT EXPIRES ONE YEAR FROM ISSUANCE DATE, RENEWABLE ONE TIME
PERMIT FEES ARE \$100 OR DOUBLED (WHICHEVER IS HIGHER) IF WORK BEGAN PRIOR TO

PROPERTY

Property Location/Address	Property Map/Lot
Zoning District	Lot Acreage
Number of Dwelling Units	Required Setbacks Front Rear Side
Owner Name	DIG SAFE # (CALL 811)

APPLICANT

Name (IF different than owner)	Email Address
Mailing Address	Contact Phone Number
Mailing City/State/Zip	Alternate Phone Number
Contractor Name	Contractor Phone Number

PROJECT

Approximate Project Dimensions	_____ X _____ = _____	Estimated Construction Cost	\$ _____ (Required)
Project Description	<input type="checkbox"/> New Construction <input type="checkbox"/> Renovation <input type="checkbox"/> Tear Down/Reconstruct <input type="checkbox"/> Addition <input type="checkbox"/> Demo		
Structure Type	<input type="checkbox"/> Home <input type="checkbox"/> Garage <input type="checkbox"/> Deck <input type="checkbox"/> Shed <input type="checkbox"/> Other (explain below)		

Project Description / Comments:

A COMPLETE APPLICATION REQUIRES

- Plot Plan/Survey
 Construction Documents
 Septic Design

** FINAL OCCUPANCY INSPECTION IS REQUIRED FOR YOUR SAFETY **

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Applicant Signature

Date

FOR CODE ENFORCEMENT OFFICE USE ONLY

Inspection Record				#	Price
	Inspector	Date	Pass/Fail		
Septic 1				Foundation / Unfinished (per sq ft)	_____ x \$0.25 = \$ _____
				Finished (per sq ft)	_____ x \$0.35 = \$ _____
Septic 2				Certificate of Occupancy	_____ x \$50.00 = \$ _____
				Heating System	_____ x \$50.00 = \$ _____
Foundation				Lot Creation Fee (per new dwelling)	_____ x \$400.00 = \$ _____
				Permit renewal (one time only)	_____ x \$100.00 = \$ _____
Rough In				Demo	_____ x \$50.00 = \$ _____
				Total Building Permit Fee	\$ _____
Energy				Separate Permits which may be applicable:	
Final Occupancy				Septic System (\$265-335)	_____ x _____ = \$ _____
				Driveway/entrance	_____ x \$100.00 = \$ _____
Other _____				Electrical (\$50 min)	_____ x _____ = \$ _____
				Interior Plumbing (\$40 min)	_____ x _____ = \$ _____
Other _____				Sign	_____ x \$50.00 = \$ _____
				Total	\$ _____

CODE ENFORCEMENT OFFICER APPROVAL

Signature of CEO, Tom Reinsborough	Date	Conditions (if any)
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