

RESIDENTIAL 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	LS ARL \$100 OR DO	SBLED (WI	IICHEVER IS HIGHER) If WORK	DEGANT	KIOK TO	
Property Location/Address			Property Map/Lot		<u> </u>		
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			Owner Phone Number				
Mailing City/State/Zip			Alternate Phone Number				
Contractor Name			Contractor Phone Number				
PROJECT			<u> </u>	<u></u>			
Approximate Project Dimensions	X=_		Estimated Construction Cost	\$		(Required)	
Project Description	☐ New Construction ☐	Renovation	☐ Tear Down/Reconstruct	☐ Addition	☐ Demo	ı	
Structure Type	☐ Home ☐	Garage	☐ Deck	☐ Shed	Other	(explain below)	
Project Description / Comme	nts:						
			LICATION REQUIRES Documents	an (3 Copies)			
☐ Plot Plan/Survey ☐ Construction Documents ☐ Septic Design (3 Copies) ** FINAL OCCUPANCY INSPECTION IS REQUIRED FOR YOUR SAFETY **							
	** FINAL OCCUPANCY	INSPECTION	IS REQUIRED FOR YOU	R SAFETY **			
I CERTIFY THAT	** FINAL OCCUPANCY THE ABOVE INFORMA	INSPECTION TION IS TRU	IS <u>REQUIRED</u> FOR YOU E AND CORRECT TO THI	R SAFETY ** E BEST OF M	Y KNOWLE	DGE	
I CERTIFY THAT Applicant Signature	** FINAL OCCUPANCY THE ABOVE INFORMA	INSPECTION TION IS TRU	IS <u>REQUIRED</u> FOR YOU E AND CORRECT TO THE	R SAFETY ** E BEST OF M	Y KNOWLE	DGE	
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