

Applicant is responsible for any additional costs incurred by the Planning Board

Town of Solon

P.O. Box 214
Solon, ME 04979

Building Permit Application

Application Fee Schedule:	
Residential	\$30.00
Commercial	\$75.00
Residential Accessory	\$15.00
Commercial Accessory	\$35.00
Renewal 50% of original fee	

Reference: Building Permit Ordinance Adopted March 3, 2001

Date of Application _____ Fee \$ _____ Paid _____ Expiration Date _____

Name of applicant or agent _____

Address of applicant _____ Phone No. _____

Owner's name _____

Address of Owner _____ Phone No. _____

Map Location of Construction Site: Map _____ Lot _____

1. Note: An attached site plan depicting the items listed (A-G) must be completed before the application can be processed.

- A. Location of and dimensions of existing and proposed structures
- B. Location of sewage disposal facilities
- C. Proximity of sewage disposal facilities to nearest well, spring, stream or other water body
- D. Lot dimensions and adjoining owners
- E. Proximity of structures to property lines
- F. Proximity of proposed structure to all water sources, well, springs, lakes, streams
- G. Location of water supply
- H. Attach soils report from certified soils scientist or equivalent if applicable.

2. Water source: Private _____ Public _____

3. Type of new construction: Single Family _____ Multi Family _____ No. of bedrooms _____
No. of Bathrooms _____ Frame _____ Mobile _____ Modular _____
Commercial _____ Addition _____ Garage _____ Other _____

4. If this is an addition to a residential structure, what is the proposed use of the addition? i.e. bathroom, bedroom, storage, etc. _____

5. Dimensions of proposed structure: Length _____ Width _____ Height _____

6. Is the proposed structure in a special flood zone hazard area? Yes _____ No _____
If yes, elevation of construction above base flood elevation _____

7. Provisions _____

Permits will expire 365 days from date of approval. Any change of use of permitted structure requires Planning Board review. Permits being renewed must comply with any regulations applicable at the time of the renewal.

SIGNATURE OF APPLICANT _____ DATE _____

SIGNATURE OF SOLON PLANNING BOARD _____ DATE _____

Code Enforcement Officer: _____
White: Planning Board Yellow: Town Office Pink: Applicant