Et	OWN OF ETNA PO Box G na, Maine 04434 -3551, Facsimile: 207-2 one: 207-234-4006, Fac	
APPLICATION FOR SITE E	VALUATION AND	D BUILDING PERMIT
Application #	D	ate Received:
Date Issued	Applica	tion/Permit Fee: \$
1. OWNERSHIP: In accordance with the Etna Valuatio made for the activity noted above:	n Change Notification and Build	ling Code Ordinances, application is hereby
LOCATION:		
(Number, if known, and Name of Road) PROPERTY OWNER NAME(s):		
LANDOWNER NAME(s):		
Important: Applicant must <u>attach</u> the right of title, owner		
AUTHORIZED REPRESENTATIVE'S NAME:		
Type of Ownership: Private (Individual, Corporatio	on, Non-profit, etc.)	blic (Federal, State or Local Government)
If applicant is a corporation, state whether the corporatio	n is licensed to do business in tl	he State of Maine State or No;
and <u>attach</u> a copy of Secretary of State's Registration.		
All correspondence regarding this application to be sent	to the following mailing address	:
MAILING ADDRESS:		
TELEPHONE NUMBER(S): Day: ()	Mobile: ()	Evening: ()
2. PROJECT DESCRIPTION: The undersigned propos	se to construct a New 🗌 Tem	porary Permanent Structure, Addition
or Use on property assigned Etna's Real Estate Account	t # Total Cost of Imprc	ovement: (purchase price or expected cost
of improvement – omit cents) \$, Describ	be activity for which a permit is r	equired:
Tax Map, Lot, Sub Lot, and Sub	odivision name:	Book Page
On the NORTH SOUTH EAST WEST	side of the road noted above. S	ize of Parcel: Acres, Road
Frontage: feet, Distance of Work proposed from	n closest abutting property:	feet, Setback from the edge of the
road: feet, Shoreland Zoning: Yes:	No, E:	xisting use of land:
Proposed use of land: Is Land	in Tree Growth?: Yes	No, Acreage: Softwood:
Hardwood: Mixed Wood:, (Note: Attac	:h Forest Management Plan), Co	ontinued in Tree Growth?: Yes No
Type of Improvement: House or Mobile Home (1 or 2	2 Family), 🗌 Apartment Hous	e - # of units, 🔲 Roadside Stand,
Accessory Structure over 200 square feet, Merce	cantile or Retail Store, 🗌 Man	ufacturing, 🔲 Agricultural Building,
OTHER (please describe)	; Dimensions: # of Stor	ries:, Exterior Dimensions:
Manufactured Structure: Type: Modular, Mobil	le, 🗌 Double Wide, 🗌 Acces	sory Building, 🗌 Other:
Make:, Model:	, Year of Manufacture:	, Serial #
Note: Attach necessary Sales Tax Certificate or Proof o	of Real Estate Taxes paid if reloc	cating
Residential Buildings Only: Number of Bedrooms:	, Bathrooms: # Full	# ¾ # ½
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3. SKETCH: Applicant must attach a sketch (see page 6), schematic drawing or map with details given below:

The attached sketch	, map or d	rawing is to i	nclude the f	following details	: Scale of s	sketch, drawi	ng or map: _	

\triangleright	Shape and dimensions of lot used for the Work	\succ	Locations and size of buildings already in place
۶	Location of septic system and well	۶	Existing and intended use of each building or structure
	Size and dimensions of the proposed Work	\triangleright	Any limiting factors or information relevant to the Work
Does	this permit require a driveway or entrance permit?		No; if yes, <u>attach</u> State Road or Local Road Permit
Does	this permit require Board of Appeals approval? Yes] No	; if yes, date approved:, <u>Attach</u> notice
Does	this permit require an internal plumbing permit?] No	; if yes, evidence of permit #
Does	this permit require an external plumbing permit? Yes	_ N	lo; if yes, evidence of permit #
4. V	ASTE WATER DISPOSAL AND WATER SUPPLY: On-site	e soil	survey needed Yes No Not needed; If yes,
provid	e three signed copies attached to this Application. If no, giv	e the	year the septic system installed:; Type of system(s)
in plac	ce: 🗌 Gray water, 🗌 Cesspool, 🗌 Composting/Incinera	ting to	oilet, 🗌 Engineered Septic System: Describe tank type, size
and d	sposal field dimensions:		, Distance from Water Supply:
Туре	of Water Supply: 🗌 Drilled Well, 🗌 Dug Well, 🗌 Spring	, 🗌	Other (explain):

5. EXECUTION:

I/we, the undersigned understand that the Work described in this application if approved will commence within 180 days of Permit issuance. We further understand that prior to inhabitance or use of a structure described herein, a *Certificate of Occupancy* is required. Now having read the preceding statements, which reflect the basic requirements of the *Standard Specifications* and *Etna Valuation Change Notification* documents for the Town of Etna, I/we agree to comply with and signify this agreement with my/our signature(s). I/we further state that to the best of my/our knowledge, all information submitted on this application is true and correct. I/we hereby certify that the owner of record authorizes the proposed Work, that I/we have been authorized by the owner to make this application as his/her authorized agent, and I/we agree to confirm to all applicable laws of this jurisdiction.

	Date:
Applicant	Applicant
TOWN OF ETN	IA USE ONLY
DETERMINATION OF APPLICATION: (to be completed by the Co	ode Enforcement Officer and Chief Administrative Officer)
APPROVED DENIED By:	Date:
The Town of Etna Code Enforcement Office requires a minimum of order to render a decision.	14 days to access the Work described on this Application in
If denied, indicate reason(s) why:	
Next Steps:	
Permit Placard Issued By:	Date:
Renewal Record:	
1 st Renewal \$10 Paid Received By:	Date:
Permit Placard Issued By:	Date:
2 nd Renewal \$10 Paid 🗌 Received By:	Date:
Permit Placard Issued By:	Date:
Certificate of Occupancy:	
APPROVED DENIED By:	Date: