



Town of Turner, Maine

11 Turner Center Rd. Turner, Maine 04282 – 207-225-3414 - www.turnermaine.com

Building Permit Application

Date of Application: _____ Permit Fee: _____

Owner's Name: _____ Phone: _____

Mailing Address: _____

Physical Address of Activity: _____

Contractors Name: _____ Phone: _____

Third Party Inspector Name*: _____ Phone: _____

TYPE OF CONSTRUCTION: NEW _____ REMODEL _____ ADDITION _____ DEMOLITION _____ MOVING _____

Brief description (indicate type of structure and the proposed activity i.e. "remodel kitchen or single family home" or replace roof of a duplex").

USE OF STRUCTURE: RESIDENTIAL _____ COMMERCIAL _____ INDUSTRIAL _____ OTHER _____

MOBILE HOME SERIAL# _____ MAKE/MODEL/YEAR _____

FOUNDATION TYPE:

FULL FOUNDATION _____ CEMENT BLOCK _____ FROST WALL _____ CEMENT PAD _____ OTHER _____

DIMENSIONS: _____ X _____ STORIES: _____ OTHER: _____

APPROXIMATE TOTAL COST OF LABOR & MATERIALS: \$ _____

SQUARE FOOTAGE TO RECEIVE STRUCTURAL IMPROVEMENTS: _____ S.F.

LOT SIZE - TOTAL ACREAGE: _____

LOT DIMENSIONS: FRONT _____ RIGHT _____ BACK _____ LEFT _____

FRONT SETBACK (from road center line): _____

REAR SETBACK: _____

RIGHT SIDE SETBACK: _____

LEFT SIDE SETBACK: _____

WILL ANY WIRING BE DONE: YES _____ NO _____
WILL ANY PLUMBING BE DONE: YES _____ NO _____
WILL ANY FILL BE REQUIRED: YES _____ NO _____

PLOT PLAN

Attach a scale drawing of property showing all existing and proposed structures.

NOTE: Measurements greater than 50' over minimum requirement may be estimated. Verification of dimensional information is the responsibility of the applicant. Lots within certain subdivisions may require setbacks that are greater than town ordinance. Owner/Builder are responsible for complying with conditions/covenants/requirements specific to subdivision lots.

Road Name: _____ Public Road: YES ___ NO ___

For a back lot, a copy of the deeded Right of Way shall attached to the building permit application. Minimum 60' wide Right of Way required.

I certify the information provided herein is correct:

Signature of Applicant: _____ Date: _____

Link for State Electrical Permit:

<https://www.maine.gov/pfr/professionallicensing/professions/electricians/licensing/single-family-dwelling-certification>

Section for Office Use Only

Owner's Name: _____

Assessor's Map/Lot: _____ Zone: _____

Physical Location: _____

Within 250' of River or Pond? _____ YES _____ NO

Floodplain? _____ YES _____ NO

Signature of CEO: _____ DATE: _____

Approved: _____ Denied: _____ Fee: \$ _____

Reason:

*Inspector may be required to certify compliance with state building code. Certificate of Occupancy cannot be issued without certification. Contact town CEO for additional information and list of inspectors.