

**TOWN OF ACTON
State of Maine**

(phone) 207-636-3497 (fax) 207636-4526

Growth Permit Application

Name of Owner _____ Telephone# _____

Mailing Address _____

Location of Property _____

Applicant's Name _____ Telephone # _____

Map _____ Lot _____

Complete Application Checklist

____ A. Deed or Purchase & Sale Agreement indicating the applicant's interest in the subject property

____ B. Complete Building Plans for the entire residential dwelling unit, showing floor plans of all levels and elevation drawings, with sufficient detail to indicate that the proposed structure will be able to comply with all applicable building codes and ordinances in effect within the Town of Acton.

____ C. Septic System Design on an HHE-200 form, signed by a Licensed Site Evaluator, licensed by the State of Maine.

____ D. A plot plan, indicating all proposed setbacks from property lines, water bodies, streams or wetlands, as defined in the Land Use Ordinance of the Town of Acton

____ E. A fee of \$300, payable to the Town of Acton (additional permits \$500 each)

*NOTE: A holder of an approved growth permit application **MUST obtain a building permit** to construct dwelling unit, exactly as depicted in the building plans submitted with the growth permit application, **within 90 days** of the approval of the growth permit application. **Failure to obtain a building permit within this time period will render the growth permit null and void.***

Applicant's Signature

Date

Code Enforcement Officer

Date