

↑ to be filled in by office ↑

TOWN OF ACTON

Office of Code Enforcement: 207-636-3497 x410

Email: ceo@actonmaine.org

APPLICATION FOR GREATEST PRACTICAL EXTENT

Owner Information

Point of Contact

Name _____
Mailing Address _____
Physical Address _____
Telephone _____
Email Address _____

Name _____
Address _____
Telephone # _____
Email _____

Description of Proposed Construction: _____

Site Information:

Zoning Districts:

- Shoreland
- Little Ossipee River
- Rural
- Transition
- Commercial
- Resource Protection
- Mixed Use
- Critical Rural
- Village
- A
- B
- C

Any Resource Protection on the Property Y N

Square Footage of Lot, _____

Non Vegetated Square Footage of Lot _____

Percentage of Non-Vegetated Lot Coverage _____

Lot Coverage Form Required

Unified Soil Classification Symbol _____

Unified Soil Classification Group: I, II, III, IV

Exposure Category B C D

Building Plan Information:

Living Space _____ square feet

Maximum Building Height _____ feet

Number of Dwellings Units _____

Number of Bedrooms _____

Manufactured Home, Date Manufacture _____

Occupancy/Use Information:

- Residential
- Accessory/Storage
- Commercial/Industrial/Business

Required Documentation:

- Calculations for 30%
- Building Permit Application
- Certified Site Plan
- Plans / Drawing
- Photos
- DEP Permit
- Storm Water Mitigation
- Septic Design
- Other _____

Minimum Fee Due Upon Submission of This Application

- Primary Structure - \$200.00
- Accessory Structure - \$100.00

I hereby certify that all the information on this application is correct:

Signature of Applicant _____

Date _____

If applicant is not the property owner, a Letter of Authorization signed by the property owner is required

Granted

Denied, Reason _____

CEO Signature _____
Ken Paul, CEO

Date _____ Planning Board Meeting _____
Date _____