



City of Belfast
 Dept. of Planning and Code Enforcement
 131 Church St., Belfast, ME 04915
 Voice (207) 338-1417 Ext. 125
 Fax (207) 338-1605

BUILDING PERMIT APPLICATION

Property Owner _____		Property Address _____		Map _____	Lot _____
Mailing Address (If Different) _____		City _____	State _____	ZIP _____	
Phone _____	Cell _____	Email _____			
Applicant/Contractor (If Different) _____					
Mailing Address _____		City _____	State _____	ZIP _____	
Phone _____	Cell _____	Email _____			
Design Professional, Consultant, or Engineer (If Any) _____					
Mailing Address _____		City _____	State _____	ZIP _____	
Phone _____	Cell _____	Email _____			
Zoning District _____		Flood Zone District <input type="checkbox"/> VE <input type="checkbox"/> A <input type="checkbox"/> AE <input type="checkbox"/> AO <input type="checkbox"/> None			
Shoreland District <input type="checkbox"/> GD <input type="checkbox"/> LR <input type="checkbox"/> RP <input type="checkbox"/> UR <input type="checkbox"/> SP <input type="checkbox"/> SD <input type="checkbox"/> WF <input type="checkbox"/> MHP <input type="checkbox"/> None		Elevation, If Any _____ Elevation Certificate <input type="radio"/> Yes <input type="radio"/> No			
Applicant Estimated Cost _____		CEO Determination of Cost _____			
<p>I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for denial of my permit. I agree to inspections by the Code Enforcement Officer at reasonable hours. I agree to abide by the City requirements and permit conditions.</p>					
Applicant Signature _____				Date _____	

Certificate of Occupancy Fee: Date Paid:

FOR OFFICE USE ONLY			
Fee _____	Paid By _____	Date Paid _____	
Permit No. _____	Issued By _____	Date Issued _____	

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TYPE OF IMPROVEMENT(S)	
<input type="checkbox"/> New Building or Structure	<input type="checkbox"/> Demolition
<input type="checkbox"/> Repair/Replace	<input type="checkbox"/> Addition
<input type="checkbox"/> Renovation	<input type="checkbox"/> Other
Other Desc.	

USE OF BUILDING/PROPERTY	
<p><i>RESIDENTIAL</i></p> <input type="checkbox"/> One Family <input type="checkbox"/> Two Family <input type="checkbox"/> Multi-Family # Units	<p><i>NON-RESIDENTIAL/MIXED USE</i></p> <input type="checkbox"/> Retail and Wholesale <input type="checkbox"/> Office, Bank, Professional Services <input type="checkbox"/> Restaurant <input type="checkbox"/> Lodging, Hotel, Motel <input type="checkbox"/> Amusement, Recreational <input type="checkbox"/> School, Library, Institutional <input type="checkbox"/> Service Station, Repair Garage <input type="checkbox"/> Healthcare Facilities and Services <input type="checkbox"/> Industrial and Manufacturing <input type="checkbox"/> Construction Services <input type="checkbox"/> Storage, Warehouse <input type="checkbox"/> Other
<input type="checkbox"/> Mobile Home Model Year	
Serial Number	
<input type="checkbox"/> Garage <input type="checkbox"/> Shed <input type="checkbox"/> Deck <input type="checkbox"/> Fence <input type="checkbox"/> Ramp <input type="checkbox"/> Stairs <input type="checkbox"/> Other	

Please provide a plot plan showing the location and size of any existing and proposed buildings, roads, driveways, septic Systems, wells, land clearing and landscaping. See examples on last page. Use extra sheet if necessary.

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FOR ALL CONSTRUCTION EXCEPT ONE AND TWO FAMILY DWELLINGS

NOTE: MOST NON-RESIDENTIAL STRUCTURES, ADDITIONS AND SOME ALTERATIONS REQUIRE PLANS DRAWN AND SEALED BY A LICENSED PROFESSIONAL ARCHITECT OR ENGINEER. THE CITY HAS ADOPTED THE 1996 BOCA BUILDING CODE. MORE RECENT VERSIONS OF THE BOCA OR IBC ARE ACCEPTED. A PLAN FROM AN ARCHITECT OR ENGINEER SHOULD STATE IF THE PLAN MEETS THE STANDARDS.

- Wood
 Masonry or Steel
 Heavy Timber
 Non-Combustible Type 1
 Non-Combustible Type

Sewage_Type <input type="checkbox"/> Public <input type="checkbox"/> Private (Septic) Water_Type <input type="checkbox"/> Public <input type="checkbox"/> Private (Well) Number of Off-Street Parking Spaces Number of Bedrooms (Residential Only)	Overall Dimensions Main Building ft. X ft. Number of Stories Building Height Other Building (Specify:)) ft. X ft. X ft.
<p style="text-align: center;">Floor Area (square feet)</p> Basement <input type="checkbox"/> Finished <input type="checkbox"/> Unfinished 1st Floor 3rd Floor 2nd Floor Other Floors	
<p style="text-align: center;">Heating</p> <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other	

<p style="text-align: center;">Foundation</p> <input type="checkbox"/> Full <input type="checkbox"/> Post/Columns <input type="checkbox"/> Wood <input type="checkbox"/> Crawl Space <input type="checkbox"/> Concrete <input type="checkbox"/> Other <input type="checkbox"/> Slab <input type="checkbox"/> Block Thickness Reinforcement Footing Size Thickness	<p style="text-align: center;">Floor Systems</p> First Floor Joist Size Spacing Max Span Other Floors Joist Size Spacing Max Span Joist Carrier Materials & Size Supp. Columns Materials & Spacing Floor Sheathing Materials & Thick.
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<p style="text-align: center;">Wall-Ceiling Framing</p> Exterior Stud Material & Dimensions Exterior Wall Stud Spacing Sheathing Material & Thickness Ceil. Joist Size Spacing Max Span	<p style="text-align: center;">Roof System</p> Roof_Type <input type="checkbox"/> Rafters <input type="checkbox"/> Truss Pitch Rafter Size Spacing Max Span Sheathing Material & Thickness Type of Roof Covering (Must be fire resistive)
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<p style="text-align: center;">Decks Only</p> Joist Size Spacing Max Span Joist Carrier Material & Dimension Support Column Materials Spacing Decking Materials Height of Deck from Grade Guard Rail Height Baluster Spacing (No more than 4" opening)
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STRUCTURE SIZE - Structure #1	Attach page for each additional structure
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Required Setbacks	Existing Setbacks	Proposed Setbacks
Front	Front	Front
Side	Side	Side
Side	Side	Side
Rear	Rear	Rear
Height	Height	Height

Required Lot Size	Existing Lot Size	Proposed Lot Size
Area	Area	Area
Frontage	Frontage	Frontage

Description. Describe in detail the work to be done (Example: Add a single story 10 ft. by 15 ft. kitchen addition on a frost wall foundation, with asphalt roofing. Original kitchen to be removed).

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<input type="checkbox"/> Use Permit By <input type="checkbox"/> CEO <input type="checkbox"/> Planning Board Date	<input type="checkbox"/> Driveway/Entrance <input type="checkbox"/> City <input type="checkbox"/> MDOT Date
<input type="checkbox"/> Site Plan Approval By <input type="checkbox"/> CEO <input type="checkbox"/> Planning Board Date	<input type="checkbox"/> Building Permit Date
<input type="checkbox"/> Appeals Board Date	<input type="checkbox"/> Shoreland Zone Date
<input type="checkbox"/> Plumbing Internal Date	<input type="checkbox"/> Fire Marshal Office <input type="checkbox"/> Construction <input type="checkbox"/> ADA Date
<input type="checkbox"/> Electrical <input type="checkbox"/> City <input type="checkbox"/> State Date	<input type="checkbox"/> BOCA or ICC Review Date
<input type="checkbox"/> Waste Disposal <input type="checkbox"/> Septic <input type="checkbox"/> City Sewer Date	<input type="checkbox"/> DEP <input type="checkbox"/> Design Review <input type="checkbox"/> Other
Conforming <input type="radio"/> Yes <input type="radio"/> No	

Conditions

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Amendments

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