

Map \_\_\_\_\_ Lot \_\_\_\_\_  
Road \_\_\_\_\_

# Town of Buxton Building Permit Application

Permit # \_\_\_\_\_  
Issued \_\_\_\_\_

### Owner Information

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Home \_\_\_\_\_  
Phone Work \_\_\_\_\_  
Contractor \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Home \_\_\_\_\_  
Phone Work \_\_\_\_\_

### Lot Information

Deed Date \_\_\_\_\_ Book \_\_\_\_\_ Page \_\_\_\_\_

#### District:

\_\_\_\_\_ Residential \_\_\_\_\_ Village  
\_\_\_\_\_ Rural \_\_\_\_\_ B/C \_\_\_\_\_ L/C

#### Special Area:

\_\_\_\_\_ Shoreland \_\_\_\_\_ Floodplain  
\_\_\_\_\_ Resource Prot \_\_\_\_\_ Wetlands  
\_\_\_\_\_ Subdivision \_\_\_\_\_ Conforming Lot  
\_\_\_\_\_ Lot Split \_\_\_\_\_ Non-Conforming Lot  
\_\_\_\_\_ Tree Growth \_\_\_\_\_ Open Space/Farm

#### Setback Requirements:

\_\_\_\_\_ Front \_\_\_\_\_ Side & Rear

### Permits or Review

\_\_\_\_\_ Planning Board  
\_\_\_\_\_ Appeals Board  
\_\_\_\_\_ Fire Chief /FMO  
\_\_\_\_\_ Road Commissioner  
\_\_\_\_\_ HHE 200 SWDS # \_\_\_\_\_  
\_\_\_\_\_ 1190  
\_\_\_\_\_ DEP / ACE  
\_\_\_\_\_ Pine Tree/Standish Tel  
\_\_\_\_\_ D.O.T.  
\_\_\_\_\_ Flood Elev. Cert.  
\_\_\_\_\_ HHE 221 Plumbing # \_\_\_\_\_  
\_\_\_\_\_ 1360 Elect. Cert.  
\_\_\_\_\_ Addressing Officer  
\_\_\_\_\_ Dig Safe  
\_\_\_\_\_ BMP run off controls

### Proposed Project

\_\_\_\_\_ House \_\_\_\_\_ Proposed Bedrooms \_\_\_\_\_ Int / Ext Alterations  
\_\_\_\_\_ Existing Bedrooms \_\_\_\_\_ Accessory Structure: Type \_\_\_\_\_  
Garage \_\_\_\_\_ Attached \_\_\_\_\_ Unattached \_\_\_\_\_ Addition: \_\_\_\_\_  
\_\_\_\_\_ Other: \_\_\_\_\_  
\_\_\_\_\_ Deck/Porch \_\_\_\_\_ Chimney  
\_\_\_\_\_ Mobile/Modular Home\* size \_\_\_\_\_ \_\_\_\_\_ Swimming Pool \_\_\_\_\_ Abv Grnd \_\_\_\_\_ In Grnd  
**Proposed Use:** \_\_\_\_\_ **Estimated Cost of Project: \$** \_\_\_\_\_

### Fees

### Construction

#### Floor

1. Sills Size \_\_\_\_\_ Sills must be anchored  
2. Girder Size \_\_\_\_\_  
3. Lally Column Spacing \_\_\_\_\_  
4. Joists Size \_\_\_\_\_ Spacing O.C. \_\_\_\_\_  
5. Bridging Type \_\_\_\_\_ Size \_\_\_\_\_  
6. Floor Sheathing Type \_\_\_\_\_  
7. Other Material \_\_\_\_\_ \*Insulation \_\_\_\_\_ R-19 \_\_\_\_\_

#### Exterior Walls

1. Studding Size \_\_\_\_\_ Spacing O.C. \_\_\_\_\_  
2. Header Sizes \_\_\_\_\_ Span \_\_\_\_\_  
3. Bracing \_\_\_\_\_ Yes \_\_\_\_\_ No  
4. Vapor Barrier \_\_\_\_\_  
5. Insulation \_\_\_\_\_  
6. Sheathing \_\_\_\_\_  
7. Air Barrier \_\_\_\_\_  
8. Siding \_\_\_\_\_

#### Roof

1. Rafter Size \_\_\_\_\_ Spacing O.C. \_\_\_\_\_  
Engineered Truss w/hurricane clips \_\_\_\_\_  
2. Collar Tie Size \_\_\_\_\_ Spacing O.C. \_\_\_\_\_  
3. Type of Sheathing \_\_\_\_\_  
4. Roofing Underlayment \_\_\_\_\_  
5. Roof Covering \_\_\_\_\_  
6. Roof Pitch \_\_\_\_\_

#### Interior Walls

1. Studding Size \_\_\_\_\_ Spacing O.C. \_\_\_\_\_  
2. Header Sizes \_\_\_\_\_ Span(s) \_\_\_\_\_  
3. Wall Covering Type \_\_\_\_\_  
4. Fire Wall if Required \_\_\_\_\_  
5. Other Materials \_\_\_\_\_

#### Foundation

1. Concrete Wall \_\_\_\_\_ 4. Monoslab \_\_\_\_\_  
\*Insulation \_\_\_\_\_ R-10 \_\_\_\_\_ 5. Piers/Sono/Post @ \_\_\_\_\_  
2. Frost Wall \_\_\_\_\_  
3. Masonry \_\_\_\_\_

#### Ceiling

1. Ceiling Joist Size \_\_\_\_\_ Height \_\_\_\_\_  
2. Ceiling Strapping Size \_\_\_\_\_ Spacing O.C. \_\_\_\_\_  
3. Type of Ceilings \_\_\_\_\_  
4. Vapor Barrier \_\_\_\_\_ Insulation \_\_\_\_\_

Any structure or structures erected, remodeled, altered, or moved under permission granted by this PERMIT must conform to all provisions of both the BUILDING CODE and ZONING ORDINANCE in effect on the DATE OF THIS PERMIT, unless permission for non-conformance has been granted by the ZONING BOARD OF APPEALS.

Signature of Owner \_\_\_\_\_ Date \_\_\_\_\_

Date \_\_\_\_\_ Approved \_\_\_\_\_

Received \_\_\_\_\_ Refused \_\_\_\_\_ Date \_\_\_\_\_ Signature of CEO / BI \_\_\_\_\_

**PERMIT VOID IF WORK NOT STARTED WITHIN SIX MONTHS OF DATE ISSUED. WORK MUST BE COMPLETED WITHIN 18 MONTHS OF ISSUE OR PERMIT IS VOID.**

Front View

Side View

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Floor Layout

Please show an overhead or bird's eye view  
of your lot and include the following:

- |  |  |
|--|--|
| <input type="checkbox"/> roads, driveway, right-of-way | <input type="checkbox"/> lot lines, any identifying markers  |
| <input type="checkbox"/> existing structures           | <input type="checkbox"/> wet areas, brooks, runoff           |
| <input type="checkbox"/> proposed project              | <input type="checkbox"/> setbacks from property lines        |
| <input type="checkbox"/> utility poles                 | <input type="checkbox"/> service lines (telephone, electric) |
| <input type="checkbox"/> well                          | <input type="checkbox"/> septic area                         |