TOWN OF HEBRON

Land Use/Building Permit Application

351 Paris Road, Hebron Maine 04238 Telephone: 207-744-7427 Fax: 207-744-7428

CEO: Kingston Brown Cell: 207-595-4555 Email: ceo@hebronmaine.org

Office Use Only:	
Permit Number:	
Date Issued:	
Fee Amount:	
Approved By:	

Property Owner:	
Property Address:	
Hebron Tax Map: Lot:	
Owner Address:	Phone:
Applicant Email:	Phone:
Contractor:	Phone:
Project Description:	
Please attach any necessary sketches/plar	ns depicting proposal for review.
Property Information: Date of A	Approved Subdivision: Plan #:
Lot Size: Number of Contiguous L	Lots: Number of Existing Uses:
Number of Existing Dwellings: Num	mber of Existing Units (commercial):
Proposed Setback From Property Lines: Front	(along ROW): Sides: Rear:
Please Circle <u>Y</u> es or <u>N</u> o or Attached if applica Shoreland Zone?: <u>Y</u> / <u>N</u> Flood Zone?: <u>Y</u> / <u>N</u>	
Need Address? : $\underline{\mathbf{Y}} / \underline{\mathbf{N}}$ If so, will new address be	be accessed from an existing driveway already
addressed? <u>Y</u> / <u>N</u>	
Driveway Entrance Needed?: Town: Y / N / A	Attached State MDOT : <u>Y</u> / <u>N</u> / Attached
Septic System (HHE-200): $\underline{Y} / \underline{N} / \text{Attached}$ MDEP: $\underline{Y} / \underline{N} / \text{Attached}$ ACOE: $\underline{Y} / \underline{N} / \text{Attached}$ Other: $\underline{Y} / N / \text{Attached}$ (please explain):	
NOTICE: Building Permits do not include a Electrical permits. Building permits are validate this permit and require that all wo	
Applicant's Signature:	Date:
Print:	