



**BUILDING, DEMOLITION, OR ALTERATION PERMIT**

**Code Enforcement**  
1 City Hall Plaza  
Ellsworth, ME 04605  
Phone (207) 667-4910  
Fax (207) 669-6618  
[www.ellsworthmaine.gov](http://www.ellsworthmaine.gov)

*The undersigned hereby applies for a permit to Build, Erect, Demolish, Install or Alter the following structure in accordance with the Laws of the State of Maine, the M.U.B.E.C. Building Codes and Ordinances of the City of Ellsworth.*

**PERMIT #** \_\_\_\_\_ **PROPERTY/PARCEL #** \_\_\_\_\_ **ZONE:** \_\_\_\_\_

**OWNER'S NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**APPLICANT NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**OWNER'S MAILING ADDRESS:** \_\_\_\_\_

**PROPOSED ACTIVITY:** \_\_\_\_\_

**ADDITIONAL PROJECT INFORMATION:** \_\_\_\_\_

**ESTIMATED COST: \$** \_\_\_\_\_ **TOTAL SQUARE FEET:** \_\_\_\_\_ **STORIES:** \_\_\_\_\_

**PHYSICAL LOCATION OF WORK:** \_\_\_\_\_ **LOT SIZE (ACRES):** \_\_\_\_\_

**MINIMUM BUILDING SETBACKS (FEET):** **FRONT:** \_\_\_\_\_ **SIDE:** \_\_\_\_\_ **BACK:** \_\_\_\_\_

**SHORELAND ZONE:** Erosion and Sedimentation Control must be installed and/or supervised by an individual Certified through the State of Maine – Department of Environmental Protection. A list of individuals/companies that are certified can be supplied to you by our office or by visiting <http://www.maine.gov/dep/land/training/ceec.html>.

*Any structure(s) erected, altered, installed under permission granted by this PERMIT must conform to all provisions of both the M.U.B.E.C Building Codes and the Unified Development Ordinance in effect on the DATE OF THIS PERMIT, unless permission for non-conformance has been granted by the BOARD OF APPEALS. Any party aggrieved by the City of Ellsworth Building Permit Application procedure as administered by the Code Enforcement Office, may appeal within 30days of the date of decision to the City of Ellsworth Board of Appeals, (Chapter 56 ~ Unified Development Ordinance, Article 13).*

**ADDITIONAL PERMITS REQUIRED:**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Plumbing                | <input type="checkbox"/> Sign             | <input type="checkbox"/> State Fire Marshal's Office ~ (207) 626-3870 |
| <input type="checkbox"/> Septic/HHE-200          | <input type="checkbox"/> Flood Zone       | <input type="checkbox"/> DEP (Permit-by-Rule) ~ (207) 941-4570        |
| <input type="checkbox"/> Public Sewer Connection | <input type="checkbox"/> Tree Growth      | <input type="checkbox"/> Other: _____                                 |
| <input type="checkbox"/> Electrical              | <input type="checkbox"/> Shoreland Zoning |   |

**Assessment for this project to be assigned to:** **OWNER** **APPLICANT** **OTHER** \_\_\_\_\_

**BUILDING PERMIT FEE: \$**  
**DEVELOPMENT DISTRICT FEE: \$**  
**TOTAL FEES: \$**

**APPROVED**  **DENIED**

\_\_\_\_\_  
Signature of Approving Official **Date** \_\_\_\_\_ Signature of Owner/Applicant **Date** \_\_\_\_\_