

**Town of Solon
P.O. Box 214
Solon, ME 04979**



Residential and Commercial Building Permit Application

Application Fee Schedule (04/01/2023)

- Residential \$100.00
- Residential Accessory \$50.00
- Application Renewal – 50% of original fee.
- Commercial \$200.00
- Commercial Accessory \$100.00

***Applicant is responsible for any additional costs incurred by the Planning Board.

OFFICE	Issue Date		Permit Fee		Permit #	
	Paid Date		Permit Expiration Date			
	Map #		Lot #			
	# of Copies	Owner	Town	Assessor		
CONTACT	Owner					
	Project Location					
	Mailing Address					
	Phone	Email				
	Applicant/Contractor, if other than owner					
	Mailing Address					
PROJECT	Legend		L=Length W=Width H=Height A=Area ROW=Right of Way			
	Description		<i>Check all boxes that apply</i>			
	Improvement Cost	\$			Plans / Construction Details Available	
	Property	Shoreland Zone		Flood Zone	Tree Growth	Farm
		Open		Seasonal		
	Plumbing Permits	External #			Internal #	
	Foundation	Full		Frost Wall	Slab on Grade	Pier
		Gravel		Heated	Unheated	Other
	Structure Dimensions	L	W	H	A	
		L	W	H	A	
Setbacks	15' from side	15' from rear	10' road ROW			

All work must be done in compliance with the Town of Solon's Ordinances.
<https://solon.maine.gov/documents>

1. Site Plan: (Required) depicting the items listed (A-H) must be completed before the application can be processed:

- A. Location of and dimensions of existing and proposed structures.
- B. Location of sewage disposal facilities.
- C. Proximity of sewage disposal facilities to nearest well, spring, stream, or other body of water.
- D. Lot dimensions and adjoining owners.
- E. Proximity of structures to property lines.
- F. Proximity of proposed structure to all water sources, well, springs, lakes, streams.
- G. Location of water supply.
- H. Attach soils report from certified soils scientist or equivalent (if applicable).

2. Water Source:

- Private Well Public Water

If private well, specific dug or drilled: _____

3. Wastewater Disposal (check all that apply):

- Previously installed Cesspool None Required Outhouse
 Pending Septic System

4. Type of New Construction:

- Single Family Multi-Family
 Commercial Mobile Home
 Accessory Dwelling Unit Accessory Structure
 Modular Home Garage
 Addition
 Other. Please specify: _____

5. Total # of rooms: _____
Full Bathrooms: _____
N/A: _____

Bedrooms: _____
½ Bathrooms: _____

6. If this is an addition to a residential structure, what is the purpose of the addition? (i.e. bathroom, bedroom, storage, etc.) _____

7. If the proposed is an Accessory Structure, will it be used as an Accessory Dwelling Unit?

8. Building Style:

- | | | |
|---------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Conventional | <input type="checkbox"/> Ranch | <input type="checkbox"/> Raised Ranch |
| <input type="checkbox"/> Cape | <input type="checkbox"/> Garrison | <input type="checkbox"/> Split Level |
| <input type="checkbox"/> Contemporary | <input type="checkbox"/> Post and Beam | <input type="checkbox"/> Other |

Describe: _____

9. Exterior Walls:

- | | | | |
|---|--------------------------------|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Wood | <input type="checkbox"/> Vinyl | <input type="checkbox"/> Composite | <input type="checkbox"/> Asbestos |
| <input type="checkbox"/> Stucco | <input type="checkbox"/> Brick | <input type="checkbox"/> Stone | <input type="checkbox"/> Concrete |
| <input type="checkbox"/> Other- Describe: _____ | | | |

10. Roof Surface:

- | | | | |
|----------------------------------|---|--------------------------------|------------------------------------|
| <input type="checkbox"/> Asphalt | <input type="checkbox"/> Slate | <input type="checkbox"/> Metal | <input type="checkbox"/> Composite |
| <input type="checkbox"/> Wood | <input type="checkbox"/> Other- Describe: _____ | | |

11. Basement:

- | | | |
|-------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> ¼ Basement | <input type="checkbox"/> ½ Basement | <input type="checkbox"/> ¾ Basement |
| <input type="checkbox"/> Full | <input type="checkbox"/> None | <input type="checkbox"/> Cement Floor |
| <input type="checkbox"/> Dirt Floor | <input type="checkbox"/> Basement Garage- # of Cars: _____ | |

12. Basement Condition:

- | | | | |
|---|---|------------------------------|----------------------------------|
| <input type="checkbox"/> Dry | <input type="checkbox"/> Damp | <input type="checkbox"/> Wet | <input type="checkbox"/> Walk in |
| <input type="checkbox"/> Bulkhead Access | <input type="checkbox"/> SF Basement Living Space | | |
| <input type="checkbox"/> Other- Describe: _____ | | | |

13. Cooling:

- | | | | |
|--------------------------------------|-------------------------------------|------------------------------------|----------------------------------|
| <input type="checkbox"/> Refrigerant | <input type="checkbox"/> Evaporator | <input type="checkbox"/> Heat Pump | <input type="checkbox"/> W&C Air |
|--------------------------------------|-------------------------------------|------------------------------------|----------------------------------|

14. Heating:

- HWBB
- HWCI
- Heat Pump
- Forced Hot Air
- Gravity Air
- Electric
- Wall Mount Propane
- Steam
- No Heat
- Other- Describe: _____

15. Attic:

- None
- Not Finished
- ¼ Finished
- ½ Finished
- ¾ Finished
- Full Finished
- Stair Entry
- Pull Down Stairs
- Other- Describe: _____

16. Insulation:

- Full
- Minimal
- Partial
- None

17. Attached Porch: Length: _____ Width: _____ Height: _____

- Deck w/o Roof
- Framed Porch
- Open Porch
- Screened Porch
- Enclosed Porch
- N/A

18. Provisions:

19. Other information Applicant feels is relevant:

I hereby certify that I am the owner of record of the named property, or that I have been authorized by the owner to make this application as their agent. I agree to conform to all applicable laws and codes of this jurisdiction. In addition, if this permit is issued, I certify that the Code Enforcement Officer, or their representative, shall have the authority to enter all areas covered by such permit at any reasonable hour for the purposes of inspecting said work.

This permit is not valid until it has been signed by the Owner, Planning Board Members, and the Code Enforcement Officer.

Signature of Property Owner/Applicant: _____ Date: _____

Signature of Planning Board Members: _____ Date Signed: _____

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____

Signature of Code Enforcement Officer: _____ Date: _____

PLOT PLAN

See next page. Please include: Property lines, existing and new structures, including decks, porches and patios, all outbuildings, setback dimensions from property lines, well location, wastewater disposal system location, driveway and parking areas and streets. The plan shall accurately represent the relationship between any proposed structure or addition to an existing structure and all property lines to demonstrate compliance with the setback requirements.

Town of Solon
121 South Main Street
Solon, Maine 04979
Townofsolon.clerk@yahoo.com (207) 643-2812
Townofsolon.planningboard@yahoo.com



PLOT PLAN

