

Town of Mechanic Falls
BUILDING PERMIT APPLICATION

Property Owner's Name : _____

Location of work to be done: _____

Mailing Address: _____

Telephone: _____

Type and Description of Construction:

Construction Information

Dimensions: _____ X _____ = _____ S.F. Foundation Type: _____

Approximate total value of completed project: _____

Use: Residential Accessory Commercial Industrial Other: _____

Mobile Home Information

Make / Model / Year _____

Serial number _____ Dimensions: _____ X _____ = _____ S.F.

Applicants Signature: _____ Date: _____

Property Information (to be filled out by Staff)

Tax Map #: _____ Lot #: _____ Total Acres: _____

Zoning District : _____

Flood Hazard Area: No Yes

Shoreland Zone: No Yes

Permit Fee: _____

Clerk's Receipt # _____