



# ***BIDDEFORD CODE ENFORCEMENT***

**205 MAIN STREET, BIDDEFORD, MAINE 04005**

Phone (207) 284-9236 • Fax (207) 286-9382 • P.O. Box 586 • biddefordmaine.org

## **Online Building / Demolition Permit Application Instructions**

This application form is a fillable PDF file and it is best to download to your computer and then open the file using either Adobe Acrobat or Adobe Reader when completing it. If needed, you can get the free Adobe Reader by [clicking here](#).

### **Application Instructions:**

- 1) Please fully fill out the application to the best of your ability.
- 2) If you do not know the correct information please leave the box blank.
- 3) When the form is complete, please click the yellow box near the signature line on page two, it will send the application to us via email.

**PLEASE NOTE:** *The \$60.<sup>00</sup> Building Permit application fee must be received prior to review (see payment section below).*

### **Building Permit Plan submittal instructions:**

- 1) Please attached the drawings in PDF file format to the same email as application.
- 2) If you do not have PDF drawings, please drop hard copies off at the Code office, 205 Main Street, Suite 104 (*located on Main Street next to city clerk's office*).

### **Payment:**

- 1) Checks for \$60.<sup>00</sup> made payable to City of Biddeford can be submitted via USPS, FedEx, UPS or the Drop Box located outside our office door.
- 2) The City also accepts credit or debit cards; a 2.5% surcharge is added to the \$60.<sup>00</sup> permit fee however.

This application can also be downloaded, printed, manually completed, and then faxed to our office at (207) 286-9382. Please contact us at (207) 284-9236 if you have any questions or need assistance.

**APPLICATION FEE**

**\$60.00**

Due at time of application

WORKSITE ADDRESS: \_\_\_\_\_

**For Office Use**

Date: \_\_\_\_\_

Fee: \$ \_\_\_\_\_

Issued By: \_\_\_\_\_

Permit #: \_\_\_\_\_



# BUILDING/DEMOLITION PERMIT APPLICATION

**Code Enforcement Office**

205 Main Street

Biddeford, Maine 04005

(207)284-9236 FAX (207) 286-9382

**Per City Ordinance, all permit fees are NONREFUNDABLE**

<b>Date of Application:</b> _____	<b>Type of Permit Requested: (Check all that apply)</b> <input type="checkbox"/> New structure <input type="checkbox"/> Change of use <input type="checkbox"/> Addition <input type="checkbox"/> Change of occupancy <input type="checkbox"/> Demolition <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Remodel interior <input type="checkbox"/> Move structure(s) <input type="checkbox"/> Remodel exterior <input type="checkbox"/> Commercial <input type="checkbox"/> Sign <input type="checkbox"/> Other: _____ Year of building being renovated: _____
<b>Construction Address:</b> _____ <b>Map/Lot:</b> _____ <b>Zone:</b> _____	<b>CONTRACTOR NAME:</b> _____ <b>OR</b> Same as owner <input type="checkbox"/> <b>ADDRESS:</b> _____ <b>CITY, STATE &amp; ZIP:</b> _____
<b>OWNER NAME:</b> _____ <b>ADDRESS:</b> _____ <b>CITY:</b> _____ <b>STATE:</b> _____ <b>ZIP:</b> _____ <b>TELEPHONE #:</b> _____ <b>EMAIL:</b> _____	<b>Erosion control required:</b> YES <input type="checkbox"/> NO <input type="checkbox"/> <b>Site contractor erosion control Cert #</b> _____

**Complete Description of Work and Construction Cost of Project:**      \$ \_\_\_\_\_

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Present land use: \_\_\_\_\_ Proposed land use: \_\_\_\_\_

ARE THERE ANY ASBESTOS CONTAINED MATERIALS? YES  NO

IS THERE A PRESENCE OF LEAD YES  NO  CONTRACTOR CERT #: \_\_\_\_\_

<b>Required Property Line Setbacks</b> FRONT: _____ BACK: _____ LEFT: _____ RIGHT: _____	<b>Lot coverage</b> Allowed: _____ Proposed: _____	<b>Water Setbacks</b> WETLAND: _____ STREAM: _____ TIDAL: _____ POND: _____ RIVER: _____
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**This property has:** Town water  **or** Well  Driveway opening DPW Yes  **or** No

Septic  **or** Sewer  Sewer fee paid Yes  **or** No

<b>Plumber:</b> Same as applicant <input type="checkbox"/> NAME: _____ ADDRESS: _____ CITY, STATE & ZIP: _____ TELEPHONE: _____	<p><b>SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL AND PLUMBING WORK</b></p>	<b>Electrician:</b> Same as applicant <input type="checkbox"/> NAME: _____ ADDRESS: _____ CITY, STATE & ZIP: _____ TELEPHONE: _____
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**PLEASE NOTE: Prior to ground disturbance erosion control must be in place.**

Every permit issued shall become invalid unless the work on the site authorized by such permit is commenced within 180 days after its issuance, or if the work authorized on the site by such permit is suspended or abandoned for a period of 180 days after the time the work commenced.  
 2009 IBC, Section 105.5

**Notes:**

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# DOCUMENTATION REQUIREMENTS

- Floor Plans and Elevations** of new construction
  - Include floor plan of existing structure as well as new construction for alterations and additions
  - Detail removal of all partitions and sizing of any new structural beams
  - Detail any new walls or permanent partitions
- Cross Sections** with material description and framing details
  - Stair details including dimensions of: rise/run, head room, guards/handrails, baluster spacing
- Window and Door Schedules** (Indicate windows that meet egress requirements of 5.7 sq ft clear openable area, clear openable width of 20", and clear openable height of 24")
- Foundation Plan** indicating soil type, footer dimensions, required drainage and foundation wall dimensions
- Deck Construction** including: pier layout, framing, fasteners, guards stair dimensions
- Plot Plan** including:
  - Shape and dimension of the lot
  - Footprint of existing and proposed structure with distance from actual property lines
  - Other structures including decks, porches, sheds ,pools, and garages
  - Location and dimensions of parking areas and driveways
  - **THIS DATA MUST BE ACCURATE! PROPERTY LINE LOCATIONS AND SETBACKS ARE THE APPLICANT'S RESPONSIBILITY.**
- Sewer Impact fee Receipt or New Septic Design** (when required)
- Street opening permit (from DPW)**

**\*\*\*\*ALL DRAWINGS MUST BE TO SCALE OR HAVE DETAILED DIMENSIONS\*\*\*\***

I certify that the information contained in this application and any related submissions to be true and accurate to the best of my knowledge. I understand that I am responsible for compliance with all applicable town, state and federal regulations and that failure to comply may result in the imposition of fines, legal fees, and the abatement of any violations to include abandonment of use and occupancy and corrective action such as the removal or modification of improvements if setbacks or other requirements have not been met and satisfied. I understand that this is an application and that I shall not begin any improvements until the appropriate permit (s) is/are issued nor will I make use of the improvements without first having obtained an occupancy permit. I further understand that any associated plumbing, electrical, and heating work to be undertaken in connection with this request requires separate permits. **In addition, I understand that if this project involves the creation of a new lot, a subdivision, as defined in Title 30-MRSA, Section 4401(4), as amended, has not been created without first obtaining the required approvals**

Press To Email

\_\_\_\_\_  
Signature of Owner/Applicant (type name)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Building Inspector (type name)

\_\_\_\_\_  
Date

**\*\*\*\*\*BELOW HERE FOR OFFICE USE ONLY\*\*\*\*\***

**Other information:**

- |                                    |                                                          |                               |                                                                |
|------------------------------------|----------------------------------------------------------|-------------------------------|----------------------------------------------------------------|
| 1. Flood hazard development permit | Yes <input type="checkbox"/> No <input type="checkbox"/> | 6. Shoreland overlay district | Yes <input type="checkbox"/> No <input type="checkbox"/> _____ |
| 2. Coastal dune                    | Yes <input type="checkbox"/> No <input type="checkbox"/> | 7. Subdivision                | Yes <input type="checkbox"/> No <input type="checkbox"/>       |
| 3. Historic preservation district  | Yes <input type="checkbox"/> No <input type="checkbox"/> | 8. Fire Marshall              | Yes <input type="checkbox"/> No <input type="checkbox"/>       |
| 4. Resource protection area        | Yes <input type="checkbox"/> No <input type="checkbox"/> | 9. DEP                        | Yes <input type="checkbox"/> No <input type="checkbox"/>       |
| 5. Other permits: _____            | Yes <input type="checkbox"/> No <input type="checkbox"/> | 10. Army Corps                | Yes <input type="checkbox"/> No <input type="checkbox"/>       |

### INSPECTION SCHEDULE

**It is understood that the applicant or his/her representative will notify the Building Inspector for the following inspections at least 24 hours in advance of the required inspections**

**FOOTINGS AND BASEMENT WALLS**

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_  
Do not back-fill until signed above

**ROUGH PLUMBING**

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

**ROUGH ELECTRICAL**

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

**FRAMING**

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

**INSULATION**

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

**FINAL PLUMBING**

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

**FINAL ELECTRICAL**

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

**FINAL BUILDING**

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

**Erosion control inspection**

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**Do not occupy until above has been signed and Certificate of Occupancy has been issued by the Building Inspector**