

2014 Planning Board Meeting Dates 2014

Begin at 6:15pm in Town Office

| | | | | | |
|--------------------|----------------------|----------------------|--------------------|---------------------|---------------------|
| JANUARY 6, 27th | FEBRUARY 10, 24th | MARCH 10, 24th | APRIL 7, 21st | MAY 5, 19th | JUNE 2, 16th |
| JULY 7, 21st | AUGUST 4, 18th | SEPTEMBER 8, 22nd | OCTOBER 6, 20th | NOVEMBER 3, 17th | DECEMBER 1, 15th |

The Planning Board meets twice a month to consider applications. The applicant is encouraged to attend the meeting at which his/her application will be considered. *You must submit 8 copies of the application to the board. Applications are due 6 days prior to the meeting.*

BUILDING PERMIT:

Must be approved before any construction is started. The application form may be obtained from the Town Office (207-734-2253) or the Town website. Please refer to Fee Schedule available at Town Office.

SINGLE FAMILY DWELLING UNIT GUIDELINES:

- Minimum Lot Size: 1.5 Acres
- Maximum Building Height: 38 feet Rural and 35 feet Shoreland

MINIMUM SETBACKS FOR DWELLING:

- 75 feet from Seawater
- 100 feet from Meadow Pond
- 50 feet from Center of Road
- 15 feet from Side Lot Lines

MINIMUM SHORE FRONTAGE OF LOT:

- 150 feet on Seashore and 150 feet Road Frontage
- 200 feet on Meadow Pond and 150 feet Road Frontage

SUBSURFACE WASTEWATER SYSTEM:

Must be designed by licensed firm; and submit three copies of Town Plumbing Permit to be complete.

INSTRUCTIONS
TOWN OF ISLESBORO
LAND USE APPLICATION

Please read these instructions before completing application. If a question does not apply mark box N/A. An incomplete application will not be considered by the Planning Board. All applications must be submitted by 4:30 P.M. on the Tuesday prior to the meeting.

Boxes 1-9 - Fill out as appropriate.

Box 10 - Place name of road in box.

Box 11 - Map and Lot numbers may be obtained from the Tax Maps in the Assessors' Office.

Box 12 - District may be obtained from the Protection Districts Map in the Town Office.

Box 13 A, B, & C - Fill out completely. If proposed project is in the Resource Protection District, Limited Development District, Meadow Pond District, Shoreland Protection District, or Maritime Activities District, you are required to list the amount of fill proposed to be brought in or removed from the site. If the project is for single or two family structures, or if bedrooms are proposed to be added to an existing structure, you must attach a copy of the subsurface sewage disposal plan for the structure.

Box 14 - Explain the proposed use of the project; i.e. residential addition, seasonal residence, etc.

Box 15 - Include estimated cost of labor and materials.

Box 16 - Explain the current use of the property; i.e. undeveloped, seasonal residence, year round residence, etc.

Box 17-19 - This information may be obtained from your property card in the Assessors' Office.

Box 20 - This information may be obtained from the Flood Hazard Maps on file in the Town Office. If property is not in a floodplain, write N/A in box.

Box 21 - Include driveways, decks and porches, parking areas, patios, area covered by building, etc.

Box 22 - Measure height from mean grade level to peak of roof, or if a non-residential structure, to highest point of structure.

Box 23-24 - Please complete this information as the fee is based on square footage.

IF YOU INTEND TO EXPAND A NON-CONFORMING STRUCTURE, ONE WHICH DOES NOT MEET THE SET-BACK REQUIREMENTS, PLEASE ASK FOR LAND USE APPLICATION FORM 2 NC (Page 2A). See Chapter 4 of the Land Use Ordinance to determine if structure is non-conforming.

Additional Permits, Approvals, and /or Reviews Required - Check boxes as appropriate. Consult with Codes Enforcement Officer in case of doubt about which permits or approvals may be required.

Sign on appropriate line. If you have an agent representing you, both must sign on the appropriate lines. By signing the application and by authorizing an agent to sign the application, you are authorizing the agent to act on your behalf in all matters regarding the application. PLEASE NOTE: You, your agent, and/or your contractor may be each, severally, and jointly responsible for any violation of the Ordinance or conditions of the Land Use Permit. Please read the Ordinance and/or your permit before commencing any work.

Fill out pages 3 & 4. Include all dimensions of structures and facilities. Projects requiring site review must have site clearly staked indicating corners of structures, disposal systems, wells, driveways, etc. Mean grade level should also be established and marked by the applicant prior to site review.

Leave Page 5 Blank

IF YOU HAVE ANY QUESTIONS, PLEASE CONSULT THE CODES ENFORCEMENT OFFICER OR A PLANNING BOARD MEMBER.

TOWN OF ISLESBORO
P.O. BOX 76
ISLESBORO, ME 04848
(207)734-2253
FAX 734-8394

| |
|----------------------------|
| FOR OFFICE USE ONLY |
| Application/Permit No. |
| Fee Amount |
| Date Received |
| Permit Issue Date |

LAND USE APPLICATION

PLEASE ANSWER ALL QUESTIONS. TYPE OR PRINT LEGIBLY

| | | | | | |
|--|--|-------------------------|---|-----------------------------|--------------|
| 1. APPLICANT'S NAME | | 2. APPLICANT'S ADDRESS | | 3. TELEPHONE NO. | |
| 4. PROPERTY OWNER | | 5. OWNER'S ADDRESS | | 6. TELEPHONE NO. | |
| 7. CONTRACTOR'S NAME | | 8. CONTRACTOR'S ADDRESS | | 9. TELEPHONE NO. | |
| 10. LOCATION OF PROPERTY | | | 11. MAP NO. | 12. LOT NO. | 12. DISTRICT |
| 13A DESCRIPTION OF PROJECT. Include description of all proposed construction. Include land clearing, road building, sub-surface sewage disposal systems, wells, etc. Please note that a sketch plan is required on page 3 of this application. IF PROPOSED PROJECT IS A NEW RESIDENCE OR AN ADDITION TO AN EXISTING RESIDENCE THAT INVOLVES ADDITION OF BEDROOMS, SPECIFY NUMBER OF BEDROOMS EXISTING AND TO BE ADDED OR CONSTRUCTED AND ATTACH COPY OF SUBSURFACE SEWAGE DISPOSAL PLAN TO | | | | | |
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| 13B PRESENT NUMBER OF BEDROOMS | | | 13C NUMBER OF BEDROOMS TO BE ADDED OR CONSTRUCTED | | |
| | | | | | |
| 14 PROPOSED USE OF PROJECT OR PROPERTY | | | | 15 EST. CONSTRUCTION COST | |
| | | | | | |
| 16. EXISTING USE OF PROPERTY | | | | 17 LOT AREA (SQ. FT) | |
| | | | | | |
| 18 ROAD FRONTAGE (FT.) | | 19 SHORE FRONTAGE (FT.) | | 20. 100 YR. FLOOD ELEVATION | |
| | | | | | |
| 21. SQ. FT OF LOT TO BE COVERED BY NON-VEGETATED SURFACE | | | 22. HEIGHT OF PROPOSED STRUCTURE | | |
| | | | | | |
| 23 SQ. FOOTAGE OF PROPOSED LIVING AREA | | | 24. SQ. FOOTAGE OF OTHER PROPOSED AREAS | | |
| | | | | | |

TOWN OF ISLESBORO, LAND USE APPLICATION

ADDITIONAL PERMITS, APPROVALS, AND/OR REVIEWS REQUIRED

- _____ CODE ENFORCEMENT OFFICER REVIEW OR APPROVAL
 - _____ PLANNING BOARD REVIEW/APPROVAL
 - _____ FLOOD HAZARD DEVELOPMENT PERMIT
 - _____ EXTERIOR PLUMBING PERMIT (Approved HHE 200 Application Form)
 - _____ INTERIOR PLUMBING PERMIT
 - _____ ELECTRICAL PERMIT
 - _____ FIRE MARSHALL PERMIT
 - _____ D.E.P PERMIT (Site Location, Permit By Rule, Natural Resources Protection Act) Tel:287-2111
 - _____ ARMY CORPS OF ENGINEERS PERMIT (e.g. Sec. 404 of Clean Waters Act) Tel: 623-8367
 - _____ CEMETERY SITE
 - _____ MAINE DEPARTMENT OF INLAND FISHERIES AND WILDLIFE (ESSENTIAL HABITATS)
- _____
- _____

APPLICANT IS ADVISED TO CONSULT WITH CODES ENFORCEMENT OFFICER AND THE APPROPRIATE STATE AND FEDERAL AGENCIES TO DETERMINE IF ADDITIONAL PERMITS, APPROVALS AND REVIEWS ARE REQUIRED.

I CERTIFY THAT ALL INFORMATION GIVEN IN THIS APPLICATION IS ACCURATE. ALL PROPOSED USES SHALL BE IN CONFORMANCE WITH THIS APPLICATION AND THE TOWN OF ISLESBORO LAND USE ORDINANCE. I AGREE TO FUTURE INSPECTIONS BY THE CODES ENFORCEMENT OFFICER AT REASONABLE HOURS.

Applicant's Signature

Date

Agent's Signature (If Applicable)

Date

TOWN OF ISLESBORO LAND USE APPLICATION

FORM 2NC

PLEASE USE THIS FORM ONLY IF YOU INTEND TO EXPAND A NON-CONFORMING STRUCTURE OR FACILITY. A NON-CONFORMING STRUCTURE OR FACILITY IS ONE THAT DOES NOT MEET THE SET-BACK REQUIREMENTS OF THE LAND USE ORDINANCE.

PLEASE CONSULT THE CODES ENFORCEMENT OFFICER OR A PLANNING BOARD MEMBER IF ADDITIONAL INFORMATION OR ASSISTANCE IS REQUIRED.

| | |
|---|---|
| <p>23. (A) SQ. FT. PORTION OF STRUCTURE NOT MEETING REQUIRED SET-BACK AS OF 1/1/89:</p> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div> | <p>24. (A) CU. FT. PORTION OF STRUCTURE NOT MEETING REQUIRED SET-BACK AS OF 1/1/89:</p> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div> |
| <p>(B) SQ. FT. OF EXPANSIONS OF PORTION OF STRUCTURE NOT MEETING REQUIRED SET-BACK FROM 1/1/89 TO PRESENT:</p> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div> | <p>(B) CU. FT. OF EXPANSIONS OF STRUCTURE NOT MEETING REQUIRED SET-BACK FROM 1/1/89 TO PRESENT:</p> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div> |
| <p>(C) SQ. FT. OF PROPOSED EXPANSION OF PORTION OF STRUCTURE NOT MEETING REQUIRED SET-BACK:</p> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div> | <p>(C) CU. FT. OF PROPOSED EXPANSION OF PORTION OF STRUCTURE NOT MEETING REQUIRED SET-BACK:</p> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div> |
| <p>(D) PERCENT SQ. FT. INCREASE OF ACTUAL AND PROPOSED EXPANSION OF PORTION OF STRUCTURE NOT MEETING REQUIRED SET-BACK:</p> <div style="text-align: center; margin-top: 10px;"> $\frac{B + C}{A} \times 100$ </div> <p>% INCREASE =</p> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div> | <p>(D) PERCENT CU. FT. INCREASE OF ACTUAL AND PROPOSED EXPANSION OF PORTION OF STRUCTURE NOT MEETING REQUIRED SET-BACK:</p> <div style="text-align: center; margin-top: 10px;"> $\frac{B + C}{A} \times 100$ </div> <p>% INCREASE =</p> <div style="border: 1px solid black; width: 100%; height: 20px; margin-top: 5px;"></div> |

IF YOU ARE REQUIRED TO FILL OUT THE 2NC FORM, YOU MUST ALSO NOTIFY ABUTTING PROPERTY OWNERS BY CERTIFIED MAIL, AT LEAST SEVEN DAYS BEFORE THE APPLICATION IS TO BE CONSIDERED BY THE PLANNING BOARD, OF THE APPLICANT'S INTENTIONS BY SENDING A COPY OF THE APPLICATION TO EACH ABUTTER TOGETHER WITH NOTICE OF THE TIME, DATE, AND PLACE OF THE PLANNING BOARD HEARING. THE APPLICANT SHALL PROVIDE THE PLANNING BOARD WITH AN EXACT COPY OF THE DOCUMENTS THAT WERE SENT BY CERTIFIED MAIL TO THE ABUTTERS, ALONG WITH THE CERTIFIED MAIL RECEIPTS.

TOWN OF ISLESBORO LAND USE APPLICATION

SITE PLAN

Please include: Lot lines; area to be cleared of trees and other vegetation; the position of proposed structures, including decks, porches, and outbuildings with accurate set-back distances from the normal high water line, side, front, and rear property lines; the location of existing and proposed wells, subsurface sewage disposal systems, and driveways. Show areas and amounts to be filled and graded. If the proposal is for an existing structure, please distinguish between the existing structure and the proposed expansion. Indicate dimensions of all structures and facilities.

NORTH



SCALE _____ IN = _____ FT.

TOWN OF ISLESBORO LAND USE APPLICATION

ELEVATIONS

FRONT OR REAR ELEVATION

SIDE ELEVATION

DRAW A SIMPLE SKETCH SHOWING BOTH EXISTING AND PROPOSED STRUCTURES

TOWN OF ISLESBORO LAND USE APPLICATION
APPROVAL OR DENIAL OF APPLICATION

(For Office Use Only)

| | | |
|---|---------------|----------------------|
| MAP | LOT | APPLICATION/PERMIT # |
| THIS APPLICATION IS <input type="checkbox"/> APPROVED DATE _____ | | |
| THIS APPLICATION IS <input type="checkbox"/> DENIED DATE _____ | | |
| IF DENIED, REASON(S) FOR DENIAL: | | |
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| IF APPROVED, THE FOLLOWING CONDITIONS ARE PRESCRIBED: | | |
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| | | |
| NOTE: In approving a Land Use Permit, the proposed use shall comply with the purposes and requirements of the Town of Islesboro Land Use Ordinance. | | |
| _____ CODES ENFORCEMENT OFFICER | _____ DATE | |
| _____ FOR THE PLANNING BOARD | _____ DATE | |
| INSPECTION CHECKLIST: | | |
| <input type="checkbox"/> Prior to clearing and excavation | Date | _____ |
| <input type="checkbox"/> Verified set-backs | Date | _____ |
| <input type="checkbox"/> Subsurface sewage disposal | Date | _____ |
| <input type="checkbox"/> Internal plumbing | Date | _____ |
| <input type="checkbox"/> Property card information | Date | _____ |
| <input type="checkbox"/> Percent of lot coverage | Date | _____ |
| <input type="checkbox"/> Additional information | Date | _____ |