Town of Lisbon

FILL AND EXCAVATION PERMIT

300 LISBON ST
LISBON, ME 04250
(207)353-3000
(207)353-3007 FAX

DATE_____ **FEE: $50.00**

The undersigned hereby applies for a permit to deposit or remove fill in excess of twenty (20) cubic yards:

Applicants Name: _____

Address: _____ Phone: _____

Property Owners Name: _____

Property Location: _____Map# _____ Lot# _____

Number of cubic yards (max 500 cy) to be DEPOSITED: _____

Number of cubic yards to be REMOVED: _____

***IMPORTANT REQUIREMENTS**:

1. An accurate plot plan must accompany this request.

2. Work SHALL NOT BEGIN until this application is approved by Public Works Director/ Foreman AND the Code Enforcement Officer

3. FILLING / EXCAVATING in the Resource Protection Zone shall be approved by the Planning Board.

Account Code: Type 36 Cat 3 R03-4164

Result of review by Public Works: _____

_____

Permit Approved: _____ Permit Denied/Reason: _____

_____

Signature Public Works

Permit Approved: _____ Permit Denied/Reason: _____

_____

Signature Code Enforcement

PLOT PLAN

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Show all locations of structures and parking areas including dimensions; show distances of construction from ALL property lines and from septic system.

NOTE: Front setback has to be from right-of-way of the street NOT from pavement or centerline.

SEWER PERMIT: Show location of building sewer and water line from connection in the street to foundation; locate nearest manhole and give distance to the street connection.

FILL PERMITS: Show dimensions of the area to be filled/excavated; locate all water bodies in wetlands; locate existing and proposed drainage areas; SEPARATELY show a profile of the area to be filled or excavated and give estimated elevations.

** I HEARBY STATE THAT I HAVE READ AND FULLY UNDERSTAND ALL OF THE ABOVE.

Signature: _____ Printed Name: _____ Date: _____