



TOWN OF ALLENSTOWN
BUILDING DEPARTMENT
APPLICATION FOR BUILDING PERMIT

16 School St, Allenstown NH 03275

Tel: 485-4276

RESIDENTIAL PERMIT



Application Date: _____ - _____ - _____

Property Information

Street Number: _____ Street Name: _____

Unit / Apt No: _____ Tax Map-Lot # _____

Owner Information

First/Business Name: _____ Last Name: _____

Telephone: (day) _____ (eve) _____

Street/Box No: _____ Address _____

City/Town: _____ State: _____ Zip: _____

Applicant. (complete only if applicant is not the property owner.)

First/Business Name: _____ Last Name: _____

Telephone: (day) _____ (eve) _____

Street/Box No: _____ Address _____

City/Town: _____ State: _____ Zip: _____

Contractor, Professional Trades

Name: _____ Phone: _____ License # _____

Telephone: (day) _____ (eve) _____

Street/Box No: _____ Address _____

City/Town: _____ State: _____ Zip: _____

Improvement Type (check only one type)

___ New Construction

___ Demolition of Structure

___ Add to Existing Structure

___ Relocate Structure

___ Alter Existing Structure

___ Foundation Only/Type _____

___ Repair/Repl. Existing Structure ___ Other _____

Is the proposed construction or the property on which it is located in a floodplain zone?

___ Yes ___ No If yes specify zone _____

Dimensions

Lot frontage on public right-of-way _____ ft
Front setback of proposed construction _____ ft
Rear setback of proposed construction _____ ft
Left setback of proposed construction _____ ft
Right setback of proposed construction _____ ft
Building height of proposed construction _____ ft
Wetlands/Surface water setback of proposed construction _____ ft

Number and Type of spaces

Total number of stories in proposed construction _____
Number of new bedrooms in proposed construction _____
Number of new garages in proposed construction _____
Number of fireplaces in proposed construction _____
Number of dwelling units added in proposed construction _____

Area Tabulation

Area of lot on which construction is proposed _____ sq/ft
Building area (add all floors in the proposed construction) _____ sq/ft
Area of all new parking spaces created in this construction _____ sq/ft
Area of garage (s) _____ sq/ft
Area of basement _____ sq/ft

Domestic Water ___ Municipal ___ Private Well

Municipal sewer ___ Yes ___ No DES # _____

Estimated Start Date _____ Estimate Finish Date _____

Total Fee _____ **Received by** _____ **Date** _____

[] Approved
[] Approved with conditions

[] Denied

Signature: _____ Date _____

If a person other than the owner of the property makes the application, It shall be accompanied by a declaration of the owner authorizing the proposed work.

Description of work to be completed

I certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit is issued, I certify that the code official or the code official's representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

Owner	Address	Phone
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Applicant	Address	Phone
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Town of Allenstown New Home Building Permit Instructions
THE FOLLOWING INFORMATION AND DOCUMENTATION MUST BE PROVIDED WITH APPLICATION

		Applicable	N/A
1	Permit Application must be filled out in its entirety.	<input type="checkbox"/>	
2	Complete structural detailed plans with elevations and floor plans. Any TGIs/LVLs/trusses etc. require specification sheets to be attached.	<input type="checkbox"/>	
3	Minimum 8 1/2 x 11 plot plan showing existing and proposed structures and setbacks from all property lines, as well as any and all wetlands and wetland buffer delineations.	<input type="checkbox"/>	
4	State of New Hampshire Energy Certificate.	<input type="checkbox"/>	
5	Driveway Permit issued by the Allenstown Highway Department.	<input type="checkbox"/>	
6	Sewer Permit issued by Suncook Waste Water or approved septic design by State of New Hampshire.	<input type="checkbox"/>	
7	Fire Department approval and permits (Is sprinkler system required)?	<input type="checkbox"/>	<input type="checkbox"/>
8	Existing lot of record (copy of deed with recording date).	<input type="checkbox"/>	<input type="checkbox"/>
9	If property is now, or was ever, leased land, attach a copy of the original deed from the Town.	<input type="checkbox"/>	<input type="checkbox"/>
10	Planning Board or Zoning Board of Adjustment approvals and conditions attached.	<input type="checkbox"/>	<input type="checkbox"/>
11	State or Local Wetland and Special Permits required with approvals and conditions attached.	<input type="checkbox"/>	<input type="checkbox"/>
12	Pre-Flood Elevation Certificate attached, where applicable.	<input type="checkbox"/>	<input type="checkbox"/>
13	Elevation showing proposed structure complying with the maximum height requirements allowed in the applicable zone from finished grade.	<input type="checkbox"/>	

PERMITS EXPIRE ONE YEAR FROM ISSUE DATE. PERMIT SHALL BECOME INVALID IF WORK HAS NOT COMMENCED WITHIN SIX MONTHS AFTER ISSUANCE OF PERMIT (IBC 105.5) AND NO REFUNDS WILL BE GIVEN. IF WORK IS NOT COMPLETED WITHIN ONE YEAR FROM ISSUE DATE, THIS PERMIT MUST BE RENEWED. FOURTEEN DAYS PRIOR TO THE PERMIT EXPIRING A LETTER MUST BE SUBMITTED TO THIS OFFICE ASKING FOR A ONE YEAR EXTENSION, ONLY ONE EXTENSION WILL BE GRANTED IF RECEIVED IN WRITING BEFORE THE PERMIT EXPIRES.