

TAX MAP & LOT # _____

Paid: _____ Checked: _____

APPLICATION FOR A BUILDING PERMIT OR APPEAL
Town of Washington, New Hampshire
Revised September 9, 2011:

APPLICANT:

Name: _____

Date: _____

Mailing Address: _____

Phone: _____

Contractor' _____

Phone: _____

SEND COPY TO () OWNER () CONTRACTOR () BOTH

E-911 Address of building site: _____

(If not known, please call the Selectmen's Office)

Proposed construction is: NEW () ADDITION () ALTERATION () OUTBUILDING ()

Detailed description of proposed construction (include square footage): _____

Is any of the property in "current use" as defined in RSA 40:16? __ YES __ NO

If "Yes" provide a map that shows the land that has been changed and no longer qualifies for current use.

NOTE: Failure to supply any of the required information or giving incorrect information will result in the rejection of your application and payment of a fee for refilling. . This permit will not be approved without a septic system approval number.

PROPERTY OWNER'S SIGNATURE: _____

SIGNED UNDER PENALTY OF PERJURY

(Signature also required on page two)

Construction must begin within one year of approval date. Permit is void two years from approval date. Selectmen may grant a one-year extension for a fee if requested by the property owner prior to the permit expiration. After approval a building permit may be amended by a request to the Board of Selectmen. (Please be advised that if your original permit was granted by a Board of Adjustment approved variance the Selectmen may require any amendment request go through the Board of Adjustment). Property owners please be advised that as of October 1, 2011(this was voted on unanimously by the Board of Selectmen at their September 8, 2011 meeting) any phase of construction before all of the necessary permits have been approved by the Board of Selectmen will result in a \$100.00 fee to be added to your permit fee. Property owners if your contractor is filing applications on your behalf; please be aware that you are responsible to ensure that all of your permit have been approved before construction. All new residences must file for an occupancy permit upon completion of construction. Contractor/builder will be responsible for construction in accordance with New Hampshire State Building Code.

NOTE: If your application is denied by the Board of Selectmen it will automatically be referred to the Board of Adjustment. A hearing will be scheduled at which you may appeal the Selectmen's decision.

As a Washington property owner you are of course entitled to the use of the Transfer Station. Please note, however, that out-of-town contractors are not, without authorization. If you plan to use a contractor who is not a resident, and if your project will create waste to be disposed of at the Transfer Station, please give him a letter authorizing this, which he can give to the attendant.

WARNING: It is possible that the restrictions in your deed may be more or less liberal than those in the LUO. The Town does not control these covenants. We advise you to check your deed or, if relevant, to inquire of your lake or other association.

INSTRUCTIONS

Done N/A

- () () SUBMIT A DRAWING OF YOUR PROPERTY AND DRIVEWAY ENTRANCES, showing where the work covered by this permit is to be located.
- () () BE SURE THAT YOUR PROPERTY HAS BEEN CLEARLY MARKED: Mark the corners of the proposed structure and relevant property lines
- () () BE SURE THAT PROPERTY LINES AND PROPOSED CONSTRUCTION LOCATIONS are clearly marked on the drawing. Include building measurements and distances to all lot lines. Locations or proposed locations of fuel tanks and parking areas should also be shown. All neighboring parcels should be labeled with owner's names, and for a new dwelling the locations of all wells and septic systems within 75 feet should be shown.
- () () DRIVEWAY PERMIT: Required for access to Town or State Roads (Obtain from Planning Board)
STATE () TOWN () EXISTING ()
- () () ENERGY PERMIT: Required for new living units, newly heated space or 50% or more increase in assessed value, requirement does not apply on manufactured housing. An Energy Permit may be obtained from the P.U.C. Concord, New Hampshire
(603) 271-2431. PERMIT OR WAIVER # _____
- () () STATE OF NH SEPTIC APPROVAL: Required for new construction for increasing the loading on existing systems. This permit will not be approved without the septic approval number.
APPROVAL# _____ DATE APPROVED _____
Type of existing septic system: _____
Will the proposed construction increase the number of bedrooms? YES () NO ()
- () () PERMIT FROM FIRE CHIEF: Required to install or replace oil or gas fired heating system (Per NH RSA)
- () () PLUMBING: Must be installed by a State Licensed Plumber (RSA 329:16)
NAME OF PLUMBING CONTRACTOR: _____
PLUMBING LICENSE # _____ PHONE # _____
- () () ELECTRICAL: Provide electrician information or if intending to do yourself please check appropriate box.
NAME OF ELECTRICIAN: _____
ELECTRICIAN LICENSE # _____ PHONE # _____
SELF ()
- () () HAVE YOU RECEIVED AN OCCUPANCY PERMIT CHECKLIST?

Are you building on water? Are you aware of the DES Shoreland Protection Act? (Information available)

A schedule of the building permit fees is attached (There will be a \$15.00 fee for any necessary revisit due to your property not properly staked for inspection)

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT

PROPERTY OWNER'S SIGNATURE: _____

Please DRAW A PLOT PLAN OF YOUR LAND in the space below and locate on it the building or structure you plan to construct. Indicate all setback distances from the right-of-way, lot sidelines, lot rear line, and/or lakefront or riverfront. All distances must be shown at the **closest points**. Failure to include **all** setbacks required above will result in rejection of this application and will delay your permit.

Also show below (or on a separate sheet) front and side elevations of the proposed construction.

SKETCHES DO NOT NEED TO BE TO SCALE, BUT DIMENSIONS MUST BE SHOWN

Basement	_____	SF
1 st Floor	_____	SF
2 nd Floor	_____	SF
3 rd Floor	_____	SF
Garage	_____	SF
Deck	_____	SF
_____	_____	SF
Total	_____	SF

OFFICIAL USE ONLY

APPLICANT'S FULL NAME: _____

Tax Map # _____ Permit # _____

CONFORMING LOT () NON-CONFORMING LOT ()

Is right-of-way identifiable? _____

INSPECTOR'S REPORT:

Information supplied was essentially correct YES () NO ()

Information has been corrected YES () NO ()

Information now conforms to ordinance YES () NO ()

Date: _____

LUO INSPECTOR'S SIGNATURE

Comments: _____

INSPECTION AFTER START OF CONSTRUCTION YES () NO ()

CONSTRUCTION CONFORMS TO PERMIT YES () NO ()

Date: _____

LUO INSPECTOR'S SIGNATURE

IS ADDITION MORE THAN 50% OF ASSESSED VALUE YES () NO ()

PRIVY COMPLIES WITH STATE REGULATIONN/A () YES () NO ()

Date: _____

HEALTH OFFICER'S SIGNATURE

ORIGINAL ACTION BY SELECTMEN: _____

APPROVED: YES () NO () _____

Date: _____

BOARD OF SELECTMEN

Reason(s) for disapproval: _____

BOARD OF ADJUSTMENT CASE # _____

Variance: GRANTED () DENIED ()

SUBSEQUENT ACTION BY SELECTMEN:

PERMIT APPROVED: YES () NO ()

EXTENSION: GRANTED YES () NO () UNTIL: _____

Date: _____

BOARD OF SELECTMEN

