

**APPLICATION FOR BUILDING PERMIT
TOWN OF THORNTON – INCORPORATED 1781
OFFICE OF THE SELECTMEN**

DATE: _____ **BUILDING PERMIT** _____

The undersigned hereby applies for a permit for the following use; to be issued on the basis of the representation contained herein.

1. NAME AND ADDRESS OF PROPERTY OWNER _____ TELEPHONE # _____
2. NAME AND ADDRESS OF BUILDER _____
3. LOCATION OF PROPERTY: TAX MAP # _____ SCENIC ROAD YES ___ NO ___ CURRENT USE ___ Y ___ N
NAME OF ROAD OR HIGHWAY _____ ROAD CLASS V ___ ROAD CLASS VI ___
4. WHAT ZONE ARE YOU IN? (Please check) ___ RURAL RESIDENCE ZONE ___ GENERAL RESIDENCE ZONE
___ COMMERCIAL ZONE ___ INDUSTRIAL ZONE I ___ INDUSTRIAL ZONE II
___ RECREATIONAL ZONE EAST ___ RECREATIONAL ZONE WEST
5. PROPOSED CONSTRUCTION TO BE USED FOR (please check) ___ RESIDENCE ___ GARAGE ___ FACTORY
___ ACCESSORY BUILDING ___ COMMERCIAL BUILDING ___ OTHER (please specify) _____
6. PERMIT IS REQUIRED TO: ___ BUILD NEW ___ CHANGE IN USE ___ RELOCATE ___ MAKE AN ADDITION TO
___ DEMOLISH OTHER (specify) _____
IF MOBILE HOME, STATE SIZE, MAKE, YEAR OF MANUFACTURE, NUMBER OF ROOMS,
ESTIMATE CURRENT VALUE _____
7. APPROXIMATE DIMENSIONS OF LOT: ROAD FRONTAGE _____ FT. DEPTH _____ FT
SIZE OF EXISTING STRUCTURE, IF ANY _____ IS PROPERTY IN DESIGNATED FLOOD ZONE ___ Y ___ N
8. DIMENSIONS OF PROPOSED BUILDING OR ADDITION:
FRONTAGE WIDTH _____ FT. TOTAL SQUARE FOOTAGE (INCLUDING FOUNDATION) _____ SQ. FT.
DEPTH _____ FT. SET BACK FROM ROAD _____ FT.
HEIGHT _____ FT. SIDE SET BACK FROM ABUTTING PROPERTY _____ FT.
STORIES _____ FT. PERCENTAGE OF LOT COVERED BY PROPOSED BUILDING
(and any existing buildings): _____ %
9. SEPTIC SYSTEM NHWSPC PERMIT # _____ NAME OF INSTALLER AND NUMBER _____
10. DOES THIS PROPERTY HAVE FRONTAGE ON THE PEMI, MAD RIVER, OR EASTMAN BROOK ___ Y ___ N
11. IS THIS PROPERTY SUBJECT TO THE SHORELAND PROTECTION ACT? ___ Y ___ N
12. IS A COPY OF THE DEPARTMENT OF ENVIRONMENTAL SERVICES PERMIT ATTACHED ___ Y ___ N
13. SOURCE OF WATER _____
14. DRIVEWAY PERMIT FROM TOWN _____ STATE OF NEW HAMPSHIRE _____
15. APPROXIMATE STARTING DATE _____ APPROXIMATE COMPLETION DATE _____
16. IS PLANNING BOARD APPROVAL NECESSARY? ___ YES ___ NO IS SPRINKLER SYSTEM REQUIRED ___ Y ___ N
17. PLUMBING CONTRACTOR NAME AND ADDRESS _____ LICENSE# _____
18. ELECTRICAL CONTRACTOR NAME AND ADDRESS _____ LICENSE# _____
19. PROVIDE COMPLETE DESCRIPTION OF WORK TO BE DONE, SKETCH OF PROPOSED PROJECT WOULD BE
HELPFUL _____
20. ESTIMATED VALUE OF ADDITION OR
CONSTRUCTION _____

I certify that the information given is true and correct to the best of my knowledge. This permit is issued subject to regulations of the Town of Thornton and State of New Hampshire. Any violation may cause the permit to be cancelled and penalty assessed as per regulations of the Town.

DISCLAIMER: "By issuance of this permit the Town of Thornton neither guarantees nor represents that the information contained on this building permit is accurate, reliable, or complete, or that the construction permitted will be or has been completed in a proper, workmanlike manner or in compliance with any applicable local or state code or regulation. No person or entity shall have the right to rely on the issuance of this permit as a basis to assert any claim against the Town, it's officials, employees or agents for personal injury, bodily injury, or property damage including without limitation any claim for economic or other consequential loss."

Signature of Owners: _____ Date _____

FLAT FEE \$50.00 _____ PD CHECK _____ CASH _____ INT. _____

PERMIT _____ APPROVED _____ DISAPPROVED REASON FOR DISAPPROVAL _____

BOARD OF SELECTMEN _____ SIGNATURE _____ SIGNATURE _____ SIGNATURE _____

DATE OF APPROVAL _____

TOWN COPY OWNER COPY ASSESSOR COPY