

**Town of Carroll
BUILDING PERMIT
APPLICATION**

Paid Date and Initial

Complete all question below or application cannot be processed. If a question does not apply, write "N/A"

DESCRIPTION OF WORK

FEEES

For a new or existing building, provide a detailed description of work and provide a drawing including setbacks dimensions for all exterior changes. For work that changes the building footprint, provide a scale drawing showing all buildings, roads, driveways, natural features, R.O.W.'s, property lines, and setbacks.

Residential Building .002 x value
Minimum \$150
 Residential Garage \$50.00
 Outbuilding \$50.00
 Renovations (Min. \$75) .002 x value
 Commercial/Industrial .002 x value
 Minimum \$200

New: Distance from one boundary line to center of driveway.

*****If Parcel is in CURRENT USE*****

Provide a map showing area of development with dimensions

Fees **MUST** be paid with application.
 Fees **WILL DOUBLE** if work is done without a Permit.

Description – Please be specific:

Permit Required

Driveway _____
 Water & Sewer _____
 911 Address _____

- | | | |
|--|---|-------------------------------------|
| <input type="checkbox"/> Mfg. Home | <input type="checkbox"/> Single Family Home | <input type="checkbox"/> Modular |
| <input type="checkbox"/> Two Family Home | <input type="checkbox"/> Demolish | <input type="checkbox"/> Commercial |
| <input type="checkbox"/> Town House | <input type="checkbox"/> Condo | <input type="checkbox"/> Other |

INTENDED USE →

Street Location of Proposed Work:

Zoning District

Tax Map: _____ Lot Number _____

AGENT & OWNER INFORMATION

SETBACKS

Name: _____

Total Acres _____

Mailing Address _____

Front: _____

Phone: _____

Left: _____

If Agent is other than Owner, List Owner & Address:
 Owner or Company: _____

Right: _____

Rear: _____

Provide Letter authorizing Agent with Owner signature
 Phone: _____

REQUIRED: Sketch W/Dimensions

OF STORIES: _____

OF DWELLING UNITS: _____

SQ. FT: _____

ESTIMATED COST: _____

Building Information

Foundation: Full; Crawl; Slab; Piers; Finished; Unfinished;
 Heated; Other (i.e.: Engineered System)

of Bedrooms _____

State of NH Septic Approval number

Please be advised: You may be required to obtain additional permits from other state/federal governmental entities.

I/We acknowledge that I/We may be required to obtain other permits from other state or federal entities and I/We understand that issuance of the Building Permit does not release me from these requirements.

Owner(s) Signature (required)

Date

Applicant(s) Signature (required)

Date

By signing this document,

- ❖ I/We understand that the information given is true and correct to the best of my knowledge and belief.
- ❖ I/We understand this permit is valid only for the work noted and expires 12 months from date of issuance.
- ❖ I/We understand that all construction will be done in accordance with town, state, and building regulations and that compliance is the sole responsibility of the applicant.
- ❖ I/We certify that all requirements specified in the Zoning Ordinance shall be met and that all structures shall comply with setback requirements as stated therein.
- ❖ I/We understand that the proposed work shall be done in accordance with the plans, sketch and specification submitted. I/We further understand that no changes to the permit shall be made without written notification to the Town and that changes may result in the need for additional approvals.
- ❖ I/We understand that the building permit card shall be posted so as to be visible from the street.
- ❖ I/We understand that violation of the terms of Zoning Ordinance, including beginning construction without a building permit, will result in an immediate cease and desist order and I/We may be subject to fines outlined in RSA 676:17.
- ❖ I/We hereby agree the Building Inspector and/or his authorized agents have the authority to enter to inspect the premises.

Owner(s) Signature (required)

Date

Agent(s) Signature (required)

Date

Municipal Use Only

Stan Borkowski, Code Enforcement Officer

Date

REQUIRED FOR PERMIT

Site Plan Showing Outline of Property

- Location of Building Dimensioned to its lot lines
- Location of Driveway Dimensioned to its side lot lines
- Location of Septic and Well
- Location of Incoming Electric Service

Plan to Include:

- Floor Plan of House

Foundation Information:

- Size, Thickness of Footing, Foundation Wall and Reinforcement

- Perimeter Drainage

- Waterproofing and Insulation of Foundation

Framing Information:

- Roof Structure Information and Covering

- Insulation Specifics - NH EC-1 Form

- Separation Requirements

- Window/Door Details

- Stair Geometry

- Electrical Diagram

- Plumbing Riser Diagram

- Heating Specifics

- Fireplaces, Chimneys and Vents

Permits & Numbers

- ❖ **NHDOT Driveway Permits – Region I** (603) 788-4641
- ❖ **Town of Carroll – Highway Department** (603) 846-5735
- ❖ **Code Enforcement Officer – Stan Borkowski** 1-802-356-5064
- ❖ **911 addresses – Carroll Police Department** (603) 846-2200
- ❖ **Carroll Water Department** (603) 846-5735
- ❖ **Licensed Plumber – RSA 329-A**
- ❖ **Licensed Electrician – RSA-319-C**
- ❖ **Intent to Cut – form can be obtained at the Town Office** (603) 846-5754
- ❖ **Scenic Road- Removal of Trees or Disturbance of Stone Walls requires Planning Board Approval prior to work done.** (603) 846-5754
- ❖ **Oil Burner permits – Carroll Fire Chief – Jeff Duncan** (603) 846-5545