BUILDING PERMIT APPLICATION

Town of Landaff 12 Center Hill Road

Landaff, NH 03585

Phone (603) 838-6220 * Fax (603) 838-5225 selectmen@landaffnh.org

PERM	IIT # \$20 fee received		
	ndersigned hereby applies for a building permit for the following use, to be issued on the of the representation contained herein:		
1.	Name of Applicant Mailing Address		
	Phone number email		
2.	Location of property: Tax map noLot no Street Address		
3.	Residence Commercial Seasonal Other		
4.	Permission is requested to: Build new Remodel Relocate Make addition to Demolish Sign Other (specify) Residence Garage Accessory building Factory Commercial building Mobile home Other (specify) Change in use (specify)		
5.	Dimensions of lot: Street frontageft., Depthft., sq.ft. or acres		
6.	Dimensions of proposed building, addition, or sign: Frontage: Widthft., Depthft., Heightft. Setbacks: From streetft., Side setback from abutter's property lineft., First floor areasq. ft.		
7.	Sanitation: Approval from the NH Water Supply and Pollution Control Board yes no permit# Town Sewer (permission from Lisbon Water and Sewer) Permit will not be granted without the above.		

building permit (1)

8.	Water: Private Town Water (page 1978)	permission from Lisbon Water and Sewer		
9.	Driveway/Parking: Permit from the Town Permit from the State Attach a copy of the approved permit, building permit will not be issued without it. Adequate off street parking approved by the Planning Board or Zoning Officer. Attach copy of approval.			
10	. Construction of building, etc.:			
	Foundation style	,		
	Roofing, S	olding,		
	Approval from Governor's Council on Energy Name and address of builder			
11	11. Include a sketch showing the dimensions of the lot, location of building(s), location of roads, location of Town water and sewer hookups (if any), names of abutting property owners, and location of proposed structure. The undersigned hereby agrees that the proposed work shall be done in accordance with the foregoing statement and in accordance with the Town of Landaff Land Use Plan and Sign Ordinance and any State requirements.			
	Applicant's signature:	Date:		
	Date received:ApprovedStipulations/reasoning:Signature of Zoning Officer:	Denied		
	Date filed with the Selectmen:			
	Selectmen Signatures (2 required)			
		building permit(2)		