

Building Permit Application

Parcel # _____ Date: _____

Applicant's Name: _____

Address: _____

Phone#: _____

❖ Location of Project: _____

Circle one New Building; Addition; Alteration; Deck; Septic System; Swimming Pool; Heating Unit; Mobile home; Modular Home; Other _____

❖ Name of Contractor: _____

Address _____

Phone# _____

❖ Name of Compensation Insurance Carrier: _____

Policy # _____ Expiration Date: _____

❖ Electrical Inspection Agency: _____

❖ New Structure Dimensions: Length _____ Width _____ Height _____

❖ Specify nature & intent of use: _____

❖ Does well, septic system and leach field have proper setback distance? ()yes ()no

❖ Has perk test been done and documented? ()yes ()no

❖ Construction Value \$ _____ Permit Fee \$ _____

Paid by: Check # _____ Cash _____ Credit Card _____

(for office use only)

Permit: accepted () denied () due to _____

Permit # _____ Expires _____ Zoning Permit # _____

Thomas Johnston, Code Officer