

Town Of Bennington Building Permit Application

7 School Street, Bennington, NH 03442
Office: (603) 588-2189
Townofbennington.com

Permit Number: _____

Permit Fee: _____

This box office use only

Property Owner

Name: _____

Address: _____
number street town state zip

Phone: _____ Mobile Phone: _____ Email: _____

Permit Applicant

Name: _____

Address: _____
number street town state zip

Phone: _____ Mobile Phone: _____ Email: _____

Property Information

Address: _____
number street Map: _____ Lot: _____

Builders & Licensed Tradespeople

	Name	License Number	Phone Number
Builder:	_____	_____	_____
Electrician:	_____	_____	_____
Plumber:	_____	_____	_____
Gas Fitter:	_____	_____	_____

Type of Building Improvement

(check all that apply)

New Addition Alteration/Remodel Renewal of Building Permit Number _____

Residential

- Single Family Two Family Multi Family
 Deck Shed Garage Barn Pool
 Electric Plumbing Mechanical
 Generator (also submit *Additional Generator Details* form)
 Gas Tank/Piping/Appliances (also submit *Gas Check* form)
 Other _____

Commercial/Institutional

IBC Use Group _____

Description of Building Improvement and Use

Total estimated cost of construction: \$ _____

General description of improvement:

If change of use, please describe existing and proposed use:

Proposed Setbacks: Front _____ Rear _____ Left Side _____ Right Side _____

- | | | |
|--|------------------------------|-----------------------------|
| Will the proposed building violate any setback for the zoning district? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building be in the Water Resource Protection Zone? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building be in the Flood Plain Protection Zone? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building require a new Town driveway entrance? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building require a new Town water connection? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building require a new Town sewer connection? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building require a new septic system design? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building have a new oil or gas burning furnace or appliance? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building have a new wood or pellet burning stove or appliance? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Affidavit by Applicant

I hereby certify that the information provided is true and correct to the best of my knowledge. No changes to the information provided shall be made without approval of the Code Enforcement Officer. I further grant the Code Enforcement Officer the right to enter the premises or buildings at reasonable times during the plan review process and for inspections of the project during the construction phase. Construction activities will not start until the Building Permit has been issued.

I acknowledge that all work will conform to the Town of Bennington Zoning Ordinance and the State of New Hampshire Building Code, and that the structure will not be occupied or utilized until a Certificate of Occupancy has been issued after all work has been completed and inspected.

Please indicate that you are the owner or authorized agent:

- I am the owner of the property
- I am the authorized agent

Signature of Applicant

Print Name

Date

Approved: _____

Selectman: _____

Selectman: _____

Date: _____

Selectman: _____

This box office use only