

Date Rcvd: _____
 Ck #: _____ / Cash/CC
 Receipt #: _____
 Mail / Pick-up

RESIDENTIAL



Permit # _____
 Permit Fee \$ _____

TOWN OF SEABROOK, NH
APPLICATION FOR RESIDENTIAL BUILDING PERMIT

Application must be in ink and legible

Project Address: _____
 Tax Map: _____ Lot: _____ Seq.: _____ Zoning District: _____ Is Lot in Current Use? Y / N
 In Flood Plain Area? : Y / N Distance from nearest wetland (within 100 ft): _____
 Property Owner: _____ Tele #: _____ E-mail: _____
 Address: _____
 Applicant/ Agent (If different): _____ Tele #: _____ E-mail: _____
 Address: _____

TYPE OF IMPROVEMENT (check all that apply) New Structure: _____ Garage: _____ Shed: _____ ADU: _____
 Foundation Only: _____ Addition: _____ Alteration: _____ Repair / Replacement: _____ Demolition: _____

DESCRIPTION OF WORK

1. *A separate application is required for all plumbing, electrical, mechanical and gas installations*
2. *Additional permits are required for water service, sewer service, driveway construction, and demolition*
3. *Two sets of building plans must accompany all applications, except repair/ replacement*

PERMIT FEE: \$35.00 Plus \$8.00 per thousand of the estimated cost, or any part thereof

- I hereby certify, under penalties of perjury, that the estimated cost of the above listed work, including all labor and materials is \$_____. Cost of Electrical, Plumbing and Mechanical work to be listed on separate applications.
- I hereby certify that all plans and construction will comply with all Town of Seabrook and State of NH codes, ordinances, and regulations and that the project will be accessible for any and all inspections pertaining to this application.

➤ **Signature of Owner / Agent:** _____ **Date:** _____

(Over)

PLOT PLAN

Show setback distances from new structures to all property lines. Please remember that the front setback is measured from the property line, not from the road. Failure to submit a completed plot plan will delay the processing of your application. Plan must be in ink and legible

Agent Authorization: The individual listed as agent has my permission to act on my behalf for purposes of this application.

➤ **Property Owner Signature:** _____ **Date:** _____

---- OFFICE USE ONLY ----

TO BE FILLED OUT BY BUILDING INSPECTOR

Water Permit: _____ Sewer Permit: _____ Demo Permit: _____ Driveway Permit: _____

Planning Board Case #: _____ ZBA Case #: _____

Date of Denial: _____ Reason for Denial: _____

If applicant was denied, indicate if the applicant was referred to: (circle)

Board of Adjustment Health Officer Board of Selectmen Planning Board

Building Inspector's Signature: _____ Date of Approval: _____

Building Permit Application #: _____