

# Town of Salem, New Hampshire

Town Hall, 33 Geremonty Drive

Salem, New Hampshire 03079 603-890-2020

**Permitting Hours** Monday through Friday

Please submit during our permitting hour: 8:30-9:30am

## BUILDING PERMIT APPLICATION

Date \_\_\_\_\_ Permit # \_\_\_\_\_

Map \_\_\_\_\_ Lot \_\_\_\_\_ Unit# \_\_\_\_\_

## ADDRESS

[www.townofsalemnh.org](http://www.townofsalemnh.org) (application valid for 30 days)

NAME OF OCCUPANT \_\_\_\_\_ PHONE # \_\_\_\_\_

NAME OF OWNER \_\_\_\_\_ PHONE # \_\_\_\_\_

CONTRACTOR'S NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

CONTRACTOR'S ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**Impact fees are due prior to occupancy: New Dwelling \$ \_\_\_\_\_ Road Improvement \$ \_\_\_\_\_**

**Assessment fees for water and sewer are due prior to occupancy \$ \_\_\_\_\_**

**Zone \_\_\_\_\_ SET BACKS: Front \_\_\_\_\_ Side (L) \_\_\_\_\_ Side (R) \_\_\_\_\_ Rear \_\_\_\_\_ Corner Lot \_\_\_\_\_**

Variance required? Yes  No  Floodplain? Yes  No  Wetlands? Yes  No  Historic District? Yes  No   
Town Water  Town Sewer  Private Well  Private Septic  **Fire Sprinklers? Yes  No**

<b>RESIDENTIAL</b>	<b>COMMERCIAL</b>	<b>MISCELLANEOUS</b>
<input type="checkbox"/> Single Family (E,P,H, F)	<input type="checkbox"/> New Commercial (E,P,F,H)	<input type="checkbox"/> Sign (P)
<input type="checkbox"/> Apartment (E,P,H)	<input type="checkbox"/> Commercial Foundation (E,P,F,H)	<input type="checkbox"/> Shed
<input type="checkbox"/> Residential Add./Alt. (E,H)	<input type="checkbox"/> Add./Alt. (E,P,F,H, ENV)	<input type="checkbox"/> Pool (E,H)
<input type="checkbox"/> Residential Raze (E,H,ENV,UTIL)	<input type="checkbox"/> Municipal Add./Alt. (E,P,F,H)	<input type="checkbox"/> Repair
<input type="checkbox"/> Manufactured Raze(E,H,PTM*,UTIL)	<input type="checkbox"/> Hotel/Motel (E,P,F,H)	<input type="checkbox"/> Deck (E,H)
<input type="checkbox"/> Manufactured Home (E, H, F)	<input type="checkbox"/> Multi-Family (E,P,F,H)	<input type="checkbox"/> Casual Sales(P,F)
<input type="checkbox"/> Residential Garage (E,H)	<input type="checkbox"/> Commercial Raze (E,P,F,ENV)	<input type="checkbox"/> Renew Permit (E,P,H)
<input type="checkbox"/> Residential Foundation(E,P,H)	<input type="checkbox"/> Change of Use (E,P,F,H)	<input type="checkbox"/> <b>MECHANICAL</b>
<input type="checkbox"/> Shoreland CSPA (E,P,H)	<input type="checkbox"/> Change of Occupant (E,P,F,H)	<input type="checkbox"/>

**E=Engineering P=Planning F=Fire H=Health ENV=Enviro. Survey**

**\*\*Residential Addition & Alteration require smoke and carbon monoxide alarms to be upgraded\*\* (IRC 314/ 315)**

**\*\*Existing Residential Fire Sprinklers shall be extended into additions/alterations\*\***

**\*PTM=Permit to Move** **UTILITY** (letter of permission from Liberty Utilities)

**\*\*\*PLANS ARE REQUIRED TO BE SUBMITTED\*\*\***

Estimated Value: \_\_\_\_\_ Dig Safe \_\_\_\_\_ Fee: \_\_\_\_\_

Work Description and Uses: \_\_\_\_\_

\_\_\_\_\_

### **Departmental Releases:**

Town Planner (P) \_\_\_\_\_

Town Engineer (E) \_\_\_\_\_

Fire Marshal (F) \_\_\_\_\_

Health Officer (H) \_\_\_\_\_

Variance Sign Off \_\_\_\_\_

I (print name) \_\_\_\_\_ agree to meet all requirements of the applicable building codes & zoning ordinances & will not backfill or cover any work until inspections have been done and the installations are approved.

Signature of Applicant

**COMPLETE BOTH SIDES**

EMAIL ADDRESS

Building Official

## SQUARE FEET OF FINISHED AREA

Area Description	Calculations	Total	Cost Bldg Dpt Only
First floor			
Second floor			
Above second floor			
Basement			
Garages			

## SQUARE FEET OF UNFINISHED AREA

Area Description	Calculations	Total	Cost Bldg Dpt Only
First Floor			
Second Floor			
Above Second Floor			
Basement			
Garages			
Decks			

**Work Description and Uses (for Building Official Only)**