

TOWN OF PLAINFIELD ZONING AND BUILDING PERMIT APPLICATION



Property Owner:					
Name: Dre Padude	Phone: 703 314 763 2				
Street: Z9 Forly Ed	Email: jpadudaccomppharmacom				
City State Zip: Plain Fixed NH 03781	Builder Email paduda Comppharma. Co				
Project:	Permit Type: (Check one) — Building Zoning				
Street Address: 7 9 Barlar Rd	MRAA-AAAF 809				
Tax Map: 213 Lot Number: 24 Lot Acres	age: 0 Zoning District: RZ				
Proposed project distances to property lines (in feet): Front:	Rear: Side: Side:				
State Approved Septic Design #: Driveway Permit #:					
Please provide a written description of the project including appropriate dimensions: Upgrade electrical paud paud paud paud paud paud paud paud	in torn and house to torn across				
Contractor Information:					
Builder: Ele	ectrician: Plumber:				
Name: Name: Stevan	Corust \ Name:				
Phone: 807 - 7	Z 9 5 - 3 9 9 4 Phone:				
Applicant Signature:	Date: 5-13-21				
· · · · · · · · · · · · · · · · · · ·	o: Town of Plainfield, PO Box 380, Meriden, NH 03770 In plans can be used if necessary. Ou are unsure of the amount due or have any questions about your address: plainfield.ta@plainfieldnh.org				
TOWN USE: Current Use: Yes / No ZBA	: Yes / No PB: Yes / No				
X Approved Depict	viewed and Approved By Building Inspector viewed by Zoning Administrator				
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