

TOWN OF PLAINFIELD ZONING AND BUILDING PERMIT APPLICATION



Property Owner:

Name: Phone:

Street: Email:

City State Zip:

Project: **Permit Type:** (Check one) Building Zoning

Street Address:

Tax Map: Lot Number: Lot Acreage: Zoning District:

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:

Contractor Information:

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| Builder: | Electrician: | Plumber: |
| Name: <input type="text"/> | Name: <input type="text"/> | Name: <input type="text"/> |
| Phone: <input type="text"/> | Phone: <input type="text"/> | Phone: <input type="text"/> |

Applicant Signature: _____ Date: _____

Required Attachments:
 Please provide a copy of plans detailing the project.
 Permits cannot be issued without receipt of the proper fee. If you are unsure of the amount due or have any questions about your application, contact the town office (603-469-3201).

TOWN USE: **Current Use:** Yes / No **ZBA:** Yes / No **PB:** Yes / No

ACTION

_____ Approved _____ Denied

Reviewed By Building Inspector

Reviewed by Zoning Administrator

(Must be approved by both for permit to be valid)

Permit #: _____ Date: _____