## TOWN OF PLAINFIELD ZONING AND BUILDING PERMIT APPLICATION



Property Owner:		
Name:	Phone:	
Street:	Email:	
City State Zip:	Builder Email	
Project:	Permit Type	: (Check one) 🔲 Building 🔲 Zoning
Street Address:		
Tax Map: Lot Number:	Lot Acreage: Zon	ing District:
Proposed project distances to property lines (	n feet): Front: Rear:	Side: Side:
State Approved Septic Design #:	Driveway Per	rmit #:
Please provide a written description of the project including appropriate dimensions:		
Cautuactau Informatia		
Contractor Information:		
Builder:	Electrician:	Plumber:
Builder:	<b>Electrician:</b> me:	Plumber: Name:
Builder: Name: Name:		
Builder: Name: Name:	me:	Name:
Name: Name: Phone: Ph	one:  cation documents to: Town of Plainfield, PC oject. Hand-drawn plans can be used if e proper fee. If you are unsure of the ar	Name:  Phone:  Date:  Date:  Box 380, Meriden, NH 03770 f necessary. mount due or have any questions about your
Builder:  Name: Na	cation documents to: Town of Plainfield, PCoject. Hand-drawn plans can be used if e proper fee. If you are unsure of the ar	Name:  Phone:  Date:  Date:  Box 380, Meriden, NH 03770 f necessary. mount due or have any questions about your
Builder:  Name: Na	cation documents to: Town of Plainfield, PCoject. Hand-drawn plans can be used if e proper fee. If you are unsure of the ar 3201). email address: plainfield.ta@pla	Name:  Phone:  Date:  Date:  Date:  Date:  Phone:  Pho
Required Attachments: Drop off or mail Appl Please provide a copy of plans detailing the propermits cannot be issued without receipt of the application, contact the town office (603-469-TOWN USE:  Current Use: Yes / No	cation documents to: Town of Plainfield, PC oject. Hand-drawn plans can be used if e proper fee. If you are unsure of the ar 3201). email address: plainfield.ta@pla	Phone:  Date:  Date: Dat