

# 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:**

<b>Builder:</b>	<b>Electrician:</b>	<b>Plumber:</b>
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. If construction plans are not available, attach a hand drawn map 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

**BOARD OF SELECTMEN ACTION**

\_\_\_\_\_ Approved      \_\_\_\_\_ Denied

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