

THE FOLLOWING INFORMATION AND DOCUMENTATION MUST BE PROVIDED WITH APPLICATION.

	√	N/A
1. Permit Application must be filled out in entirety.	<input type="checkbox"/>	<input type="checkbox"/>
2. Complete structural detailed plans with elevations and floor plans. Any TGIs/LVLs/trusses etc. require spec sheets to be attached.	<input type="checkbox"/>	<input type="checkbox"/>
3. Minimum 8 ½ x 11 plot plan showing existing and proposed structures and setbacks from all property lines, as well as any and all wetlands and wetland buffer delineations.	<input type="checkbox"/>	<input type="checkbox"/>
4. State of New Hampshire <i>stamped</i> and <i>approved</i> Energy Certificate.	<input type="checkbox"/>	<input type="checkbox"/>
5. Driveway Permit issued by Department of Public Works.	<input type="checkbox"/>	<input type="checkbox"/>
6. Sewer Permit issued by DPW or approved septic design by State of New Hampshire.	<input type="checkbox"/>	<input type="checkbox"/>
7. Fire Department approval and permits (is sprinkler system required)?	<input type="checkbox"/>	<input type="checkbox"/>
8. Existing lot of record (copy of Deed with recording date).	<input type="checkbox"/>	<input type="checkbox"/>
9. If property is now, or was ever, leased land, attach a copy of the original Deed from the Town.	<input type="checkbox"/>	<input type="checkbox"/>
10. Planning Board or Zoning Board of Adjustment approvals and conditions attached.	<input type="checkbox"/>	<input type="checkbox"/>
11. State or Local Wetland and Special Permits required with approvals and conditions attached.	<input type="checkbox"/>	<input type="checkbox"/>
12. Pre-Flood Elevation Certificate attached, where applicable.	<input type="checkbox"/>	<input type="checkbox"/>
13. Elevation showing proposed structure complying with the maximum height requirements allowed in the applicable zone from finished grade.	<input type="checkbox"/>	<input type="checkbox"/>
14. Impact Fee	<input type="checkbox"/>	<input type="checkbox"/>

NEW HOME: PROCESSING FEE \$75.00 PLUS \$5 PER THOUSAND, OR ANY PORTION THEREOF, OF VALUE OF CONSTRUCTION TO BE SUBMITTED WITH APPLICATION.

NEW COMMERCIAL: PROCESSING FEE \$100.00 PLUS \$5 PER THOUSAND, OR ANY PORTION THEREOF, OF VALUE OF CONSTRUCTION TO BE SUBMITTED WITH APPLICATION.

PERMITS EXPIRE ONE YEAR FROM ISSUE DATE. PERMIT SHALL BECOME INVALID IF WORK HAS NOT COMMENCED WITHIN SIX MONTHS AFTER ISSUANCE OF PERMIT (IBC 105.5) AND NO REFUNDS WILL BE GIVEN. IF WORK IS NOT COMPLETED WITHIN ONE YEAR FROM ISSUE DATE, THIS PERMIT **MUST** BE RENEWED.

TOWN OF HAMPTON

**New Home & New Commercial
Building Permit Instructions**

ATTACH ALL SPECIFICATIONS AND DATA LISTED ON COVER SHEET

BUILDING ADDRESS _____ Map/Lot Number _____ - _____ - _____ Zone _____

BUILDING OWNER _____ **Phone** _____

Street _____ City _____ State _____ Zip _____

CONTRACTOR _____ Phone _____

Street _____ City _____ State _____ Zip _____

DESCRIPTION AND TYPE OF CONSTRUCTION:

- New Home (Single-family dwelling) Duplex (Two dwelling units in one building)
- Multi-family (Three or more dwelling units in one or more buildings)
- Raze and Replace (Demolition of an existing structure necessary as part of the proposed construction.)
- Commercial

LEASED LAND: Is this property now or was this property ever leased land? Yes No If yes, attach a copy of the original Deed from the Town.

WETLANDS: Does the proposed project fall within the Town's 50-foot wetland buffer or the 100-foot State wetland buffer? Yes No

FLOOD ZONE? Circle One: VE VO AE X **Aquifer Protection Zone** Yes No

DESCRIPTION OF PROPOSED PROJECT:

WHERE SHOULD THE PERMIT BE MAILED? _____ Owner _____ Contractor

I agree to comply with the Town of Hampton's Building and Zoning Ordinance and all work will be constructed in accordance with the New Hampshire State Building Code, and related Codes as adopted, and in accordance with the plans submitted.

I, the Applicant, do also hereby certify that the above project shall not in any way violate any deed restrictions, rights of way, or easements applicable to the property and that I, the Applicant, for myself and my heirs, successors and assigns, do hereby agree to indemnify and hold the Town of Hampton harmless in the event any such restrictions, rights of way, or easements are violated by this project.

I hereby certify, under penalty of perjury, that all statements given hereon are truthful and accurate, and that the cost of construction, alteration or remodeling (**including labor and materials**) is: \$ _____

SIGNATURE OF APPLICANT _____ DATE _____/_____/_____

FOR DEPARTMENTAL USE ONLY			
FEE \$ _____	<input type="checkbox"/> Cash _____	<input type="checkbox"/> Check # _____	
Zoning Board Approval Required:	Yes <input type="checkbox"/> _____	No <input type="checkbox"/> _____	Received <input type="checkbox"/> _____
Planning Board Approval Required:	Yes <input type="checkbox"/> _____	No <input type="checkbox"/> _____	Received <input type="checkbox"/> _____
Fire Department Approval Required:	Yes <input type="checkbox"/> _____	No <input type="checkbox"/> _____	Received <input type="checkbox"/> _____
Conservation Board Approval Required:	Yes <input type="checkbox"/> _____	No <input type="checkbox"/> _____	Received <input type="checkbox"/> _____
Deed Restrictions:	Yes <input type="checkbox"/> _____	No <input type="checkbox"/> _____	Received <input type="checkbox"/> _____
APPLICATION APPROVED (Building Official) _____		DATE _____/_____/_____	

ITEMS REQUIRED FOR SUBMISSION WITH APPLICATION FOR NEW HOME PERMIT

1. All required information as listed on the Cover Sheet must be provided in order to process this Application.
2. Permit Application must be filled out in entirety.
3. Drawing of proposed construction (must be to scale) and include:
 - a. Foundation plan
 - b. First and second floor plan with window locations and size
 - c. Four elevations (north, south, east, west)
 - d. Structural drawings

REQUIRED INSPECTIONS

TO BE SCHEDULED A MINIMUM OF 24 HOURS PRIOR TO REQUESTED DATE AND TIME.

1. **AFTER EXCAVATION SOILS/ FOOTINGS/FORMS AND RE-BAR PRIOR TO POURING FOOTINGS**
 2. **FOUNDATION WALL FORMS AND RE-BAR PRIOR TO POURING WALLS**
 3. **FOUNDATION WALLS AND COATING PRIOR TO BACKFILL**
 4. **FIREPLACE – when fire box and smoke chamber is completed and after first flue is placed.**
 5. **LEACH FIELD BED BOTTOM EXCAVATED AND STRIPPED, including extensions, before fill is placed.**
 6. **FRAME – all structural components and partitions are in place.
Structure should be swept clean.*
 7. **ELECTRICAL – when all electric wiring is roughed in. Including any underground installations prior to backfill.**
 8. **PLUMBING – when all of the plumbing is roughed in and in test mode. Including any underground installations prior to backfill. **Either pneumatic or hydraulic.***
 8. **GAS PIPING – when complete and pressurized.**
- NOTE: FRAME, ELECTRICAL, PLUMBING AND GAS INSPECTIONS MAY BE DONE TOGETHER. IF INDIVIDUAL INSPECTIONS ARE PERFORMED, FRAMING SHALL BE THE LAST OF THESE*
9. **FIRESAFE – all penetrations, chases, voids, etc. from electric, plumbing, gas, HVAC etc. filled or sealed with a fire rated material prior to insulation.**
 10. **INSULATION - Structure to comply with all State of New Hampshire Energy Code Regulations.**
 11. **FINAL – BEFORE OCCUPANCY – All interior finish complete. All appliances and fixtures in place. All hand rails and guard rails permanently in place. All other trades, i.e. plumbing, electrical, etc. complete and signed off.**

NOTE: A \$30 RE-INSPECTION FEE WILL BE REQUIRED AFTER TWO FAILURES ON ANY REQUIRED INSPECTIONS.

The Building Inspectors ' office hours are 8:00 am to 12 and 1:00 pm to 5:00pm Monday through Friday.

Phone 603-929-5826 for appointments.

TOWN OF HAMPTON

**New Home & New Commercial
Building Permit Instructions**

APPLICANT

ADDRESS _____ TEL. _____

PROPERTY LOCATION _____

CONTRACTOR : BY OWNER _____ BY GENERAL CONTRACTOR _____

GENERAL

CONTRACTOR : _____

ADDRESS: _____

TEL _____

SUBCONTRACTORS :

FOUNDATION : _____

ADDRESS: _____

TEL _____

WELL DRILLER (if required) :

_____ LICENSE _____

ADDRESS: _____

TEL _____

FRAMING : _____

ADDRESS: _____

TEL _____

ELECTRIC : _____

LICENSE _____

ADDRESS: _____

TEL _____

PLUMBING : _____

LICENSE _____

ADDRESS: _____

TEL _____

MASONRY : _____

ADDRESS: _____

TEL _____

INSULATION : _____

ADDRESS: _____

TEL _____

LEACH FIELD : _____ **LICENSE** _____

ADDRESS: _____

TEL _____

SPECIFICATIONS OF BUILDING MATERIAL FOR PERMIT

FOOTINGS:

	Concrete	Other	Size Width	Size Depth	Reinforcing Size Rod	Reinforcing Size Wire
Foundation						
Knee Wall						
Frost Wall						
Lally Columns						
Chimney 1						
Chimney 2						
Fireplace 1						
Fireplace 2						

FOUNDATION WALLS:

	Concrete	Other	Thickness	Height	Size Rod	Size Wire
Foundation						
Knee Wall						
Frost Wall						
Garage Wall						
Other						

FLOORS:

	Concrete	Other	Thickness	Height	Size Rod	Size Wire
Cellar						
Garage						
Porch						
Other						

CHIMNEYS:

	Brick	Cement Block	Name of Factory Built	Flue Size
Chimney 1				
Chimney 2				
Fireplace 1				
Fireplace 2				

FIREPLACES:

	Brick	Cement Block	Name of Factory Built	Flue Size
Fireplace 1				
Fireplace 2				

WALL TIES:

	Number	Size	Distance Apart
Anchor Bolts			
Cellar Windows			
Crawl Area Vents			
Lally Columns			

REMARKS:

TOWN OF HAMPTON

New Home & New Commercial Building Permit Instructions

FRAMING MATERIAL:

	Kind	Grade	Size	On Center	Supplier/Manufacturer
Main Girder					
1 st Floor Joist					
2 nd Floor Joist					
Overlays					
Exterior Studs					
Interior Studs					
Rafters					
Trussed Rafters					

COVERING MATERIAL:

(Sheathing)	Kind	Grade	Thickness
1 st Floor			
2 nd Floor			
Exterior Walls			
Roof			

FINISHING MATERIAL:

	Kind
Exterior Walls	
Interior Walls	
Interior Floors	
Bathroom Floors	
Kitchen Floors	
Roof	

VENTILATION:

	Size
Louvers	
Soffit	
Ridge	

INSULATION:

	Kind	Thickness
Exterior Walls		
Interior Walls		
Ceiling		
Cellar Ceiling		

REMARKS: