

TOWN OF HAMPTON

APPLICATION FOR DEMOLITION PERMIT

BUILDING ADDRESS

Unit #

MAP/LOT NUMBER

ZONE

BUILDING OWNER

MAILING ADDRESS

TELEPHONE #

MORTGAGEE/LEIN HOLDER'S NAME

MAILING ADDRESS

TELEPHONE #

MORTGAGEE/LIEN HOLDER'S SIGNATURE

MAILING ADDRESS

TELEPHONE #

In the event there is **NO** Mortgagee(s) Lien Holder(s) then the following certificate is required by the owner:
I hereby certify that there are no mortgages and that I own the property free and clear of any mortgage.

Owner

**ALL PROPERTY TAXES CURRENT
TAX COLLECTOR**

**NO HARDSHIP LIENS
ACCOUNTING OFFICE**

DEPARTMENT OF PUBLIC WORKS

ASSESSORS OFFICE

**HAMPTON FIRE DEPARTMENT
Chief or Designee**

AQUARION WATER WORKS

UNITIL - ELECTRIC

DIG SAFE

UNITIL - UTILITIES

ASBESTOS SURVEY*

**Please attach copy of survey to this form.*

CONSERVATION COMMISSION 603-929-5808

State Permit Required Yes N/A

Special Permit Required Yes N/A

CONTRACTOR

MAILING ADDRESS

TELEPHONE

I agree to comply with all local, state, and national codes relative to the demolition and disposition of all hazardous and non-hazardous material and provide documentation of proper disposal by a Certified Abatement Contractor.

I further certify that I will hold the Town of Hampton harmless and indemnify the Town of Hampton from any claims arising out of the demolition.

SIGNATURE OF APPLICANT _____ DATE ____/____/____

FOR DEPARTMENT USE ONLY

Fee \$50 Cash Check # _____

Application approved (Building Official) _____ DATE ____/____/____

Revised 4/2014