GLEN BOSWORTH BUILDING INSPECTOR CODE ENFORCEMENT OFFICER

gbosworth@northhampton-nh.gov



MUNICIPAL OFFICES 233 ATLANTIC AVENUE NORTH HAMPTON, NH 03862

TEL: (603) 964-8650 FAX: (603) 964-1514

TOWN OF NORTH HAMPTON, NEW HAMPSHIRE

-DEMOLITION PERMIT APPLICATION-

Project Addre	ess:		
Map#	Lot#	Zone:	_ Flood Zone:
Property Own	ner(s):		Phone#
Owner(s) Ema	ail Address:		
Owner(s) Add	dress:		
Contractor:			Phone#
Contractor En	nail Address:		
Contractor Ac	ddress:		
Is the entire b	uilding to be demolish	ned? Yes No	Total Square Footage:
Estimated Pro	oject Cost:	Expected date o	of demolition
Size of Buildin Length:	ng: Width:	Height:	# of stories:
Original cons	truction date:		
etc.)	·		material is being disposed, tipping
Life Safety:			
	arm systems: <u>Notificati</u> der systems: <u>Notificati</u>	•	•

This permit will be copied to the Assessor's Office. An assessing agent may visit the property as a result.

Authorizations (if applicable):			
Fire Chief:	Gas Cor	ompany:	
Aquarion Water:	PSNH: _		
Dig Safe Number:	Asbesto	Asbestos Survey:	
State of NH Septic System	Demolit	Demolition Committee:	
	nal codes, lav	s document and know the same to be true ws, and ordinances governed by this type herein or not.	
I further certify that I am the owner o work is authorized by the owner. (Or Authorization Letter to this application	wner's Agent	s authorized agent and that the proposed t must attach a copy of an Owner	
I further certify that I will hold the Town of North Hampton from any cla		Hampton harmless and indemnify the out of the demolition.	
any additional fees or penalties as sta	ted in the tow	lled before work begins, and any such	
	nal inspection	all required inspections; that work shall be n shall be conducted before approval; and mize debris impacting neighborhood	
	within 90 day	ibed herein. Every permit issued shall ays of issuance, or if work authorized by od of 90 days after work commenced.	
Applicant: (print)			
Applicant Signature:			
Applicant Address:			
Applicant Email Address:			
Applicant Phone #:		Date:	
Permit Fee Required: \$50.00 Date Received C Permit Number:	Check #		

Building Official Signature