COMMERCIAL BUILDING PERMIT APPLICATION

TOWN OF STRATHAM
10 Bunker Hill Avenue, Stratham NH 03885
Building Department (603) 772-7391
www.strathamnh.gov

For Town Use Only: Building Permit #:_____ PID:_____ Zone:_____

PROPERTY ADDRESS:	
PROPERTY OWNER NAME:	
PHONE #:	**EMAIL ADDRESS:**
APPLICANT/CONTRACTOR COMPANY:	
CONTACT NAME (for signature line):	
PHONE #:	**EMAIL ADDRESS:**
MAILING ADDRESS:	
OWNER/APPLICANT SIGNATURE[1]:	**DATE:**

[1]**BY SIGNING ABOVE** I hereby certify I have been authorized by the owner to submit this application for the above listed property with full knowledge of the current rules and regulations of the State of New Hampshire and the Town of Stratham. I agree, upon applying for this permit, to be in conformance with these provisions. I certify that the information given is true and correct to the best of my knowledge. I acknowledge that construction activities shall not begin until the permit approval is issued; work without a permit is subject to a permit fee of twice the normal rate per the Town's Fee Schedule. I have read and acknowledge the "Building Permit Applications Guidelines" document.

Refer to Commercial Application Checklist for submission requirements.

PROJECT INFORMATION: Check all that apply and include a Description of Work.

☐ Accessory Structure	☐ Multi-Family (3 or more units)	☐ Siding
☐ Addition (new footprint)	☐ Renovation/Alteration	☐ Solar Array
☐ Building (new structure)	☐ Roofing	☐ Other:
DESCRIPTION OF WORK (dimensions/materials/scope of work):		
COST OF CONSTRUCTION:		

For Town Use Only:

Non-Refundable Application Fee[2]:	Permit Fee[2]:	Cash/Check/CC #:

[2]Refer to building fee structure approved by the Stratham Select Board on October 20, 2025, effective January 1, 2026, or as amended.

APPROVED:_____DATE:_____

Conditions of approval: