



TOWN OF STRATHAM

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

RESIDENTIAL BUILDING PERMIT APPLICATION

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

PROPERTY ADDRESS:	
PROPERTY OWNER NAME:	
PHONE #:	EMAIL ADDRESS:
APPLICANT/CONTRACTOR:	
PHONE #:	EMAIL ADDRESS:
MAILING ADDRESS:	
OWNER/APPLICANT SIGNATURE*:	DATE:

***BY SIGNING ABOVE** I hereby certify that I am the owner of record of the subject property or that I have been authorized by the owner to make this application as the authorized agent and agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Enforcement Officer/Building Inspector or representative shall have the authority to enter areas covered by such permit at reasonable hour to enforce the provisions of the code(s) applicable to such permit. I certify that the information given is true and correct to the best of my knowledge. No changes from the application information will be made without approval of the CEO/Building Inspector. Construction activities shall not commence until the permit is issued. I acknowledge that all construction will be done in accordance with local town and state ordinances and building regulations and that compliance is the sole responsibility of the owner and applicant. I realize that when all necessary approvals have been acquired, a permit may be granted to allow construction or change in land use in conformance with this application and those plans/specifications submitted in support thereof. I further acknowledge that the proposed structure or improvements shall not be occupied or otherwise utilized without the issuance of a certificate of occupancy by the CEO/Building Inspector.

PROJECT INFORMATION check all that apply. **REQUIRED: 1 set of hard copy plans AND one electronic file.**

<input type="checkbox"/> Accessory Dwelling Unit	<input type="checkbox"/> HVAC	<input type="checkbox"/> Renovation/Alteration (External)
<input type="checkbox"/> Addition	<input type="checkbox"/> Mini-Split System	<input type="checkbox"/> Renovation/Alteration (Internal)
<input type="checkbox"/> Deck/Porch	<input type="checkbox"/> New Multi-Family Dwelling	<input type="checkbox"/> Shed less than or equal 120 square feet
<input type="checkbox"/> Fence	<input type="checkbox"/> New Single Family Dwelling	<input type="checkbox"/> Shed greater than 120 square feet
<input type="checkbox"/> Fireplace/Wood/Gas/Pellet Stove Insert	<input type="checkbox"/> Pool/Hot Tub	<input type="checkbox"/> Siding
<input type="checkbox"/> Garage/Barn	<input type="checkbox"/> Propane Tank	<input type="checkbox"/> Solar Array
<input type="checkbox"/> Gas – Furnace or Lines	<input type="checkbox"/> Roofing	<input type="checkbox"/> Window/Door Replacement
<input type="checkbox"/> Generator	<input type="checkbox"/> Oil Burning Equipment (lines, burner, tank) requires NH State Oil Burner Permit	
<input type="checkbox"/> Other:		

DESCRIPTION OF WORK (include dimensions/materials/scope of work):

Cost of Construction:	Permit Fee:	Cash/Check/CC #:
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For Town Use Only:
APPROVED FOR CONSTRUCTION: _____ **DATE:** _____

Conditions of approval:

ELECTRICAL	Business Name:		Contact:	
	Electrician Name:		License Number:	Job Cost:
	Phone #:	Email Address:		
	Mailing Address:			
	Job Description:			
	Signature:		Date:	
TOWN USE	Permit #:	Fee:	Cash/Check #/CC:	
	Building Signature:		Date:	
PLUMBING	Business Name:		Contact:	
	Plumber Name:		License Number:	Job Cost:
	Phone #:	Email Address:		
	Mailing Address:			
	Job Description:			
	Signature:		Date:	
TOWN USE	Permit #:	Fee:	Cash/Check #/CC:	
	Building Signature:		Date:	
GAS	Business Name:		Contact:	
	Gas Fitter Name:		License Number:	Job Cost:
	Phone #:	Email Address:		
	Mailing Address:			
	Job Description:			
	Signature:		Date:	
TOWN USE	Permit #:	Fee:	Cash/Check #/CC:	
	Building Signature:		Date:	
HVAC/MECHANICAL	Business Name:		Contact:	
	MBE License Number:		Job Cost:	
	Phone #:	Email Address:		
	Mailing Address:			
	Job Description:			
	Signature:		Date:	
TOWN USE	Permit #:	Fee:	Cash/Check #/CC:	
	Building Signature:		Date:	