TOWN OF GILMANTON - 603-267-6700 ext. 111
BUILDING PERMIT APPLICATION

Date of Application:	When approved Call	Mail	TAX MAP/LOT #	
Zoning District:	Historic District:	Email:	PERMIT #	
SEPTIC APPROVAL #	DRIVEWAY APPROVAL?	HDC APPROVAL?	ZBA APPROVAL?	

PROPERTY OWNER(S) PHONE #

STREET ADDRESS OF PROPERTY **ZIP** CLASS of ROAD

COMPLETE MAILING ADDRESS if different: STATE ZIP

NAME OF BUILDER or CONTRACTOR PHONE #

BUILDERS MAILING ADDRESS STATE ZIP

ELECTRICIAN LICENSE # PHONE #

ELECTRICIAN ADDRESS STATE ZIP

PLUMBER or GAS LICENSE HOLDER LICENSE # PHONE #

ADDRESS STATE ZIP

NEW SINGLE FAMILY DWELLING	
NEW TWO or MULTIPLE FAMILY DWELLING	
NEW MANUFACTURED HOME (MOBILE HOME)	
NEW OUTBUILDING	
NEW SINGLE UNIT COMMERCIAL	
NEW MULTI UNIT COMMERCIAL	
CELL TOWER/ATENNA	
DEMOLITION **needs asbestos report first**	
FOUNDATION UNDER EXISTING STRUCTURE	
ADDITION TO EXISTING RESIDENTIAL	
ADDITION TO EXISTING OUTBUILDING	
ADDITION TO EXISTING COMMERCIAL BUILDING	
RENOVATION TO EXISTING RESIDENTIAL	
RENOVATION TO EXISTING OUTBUILDING	
RENOVATION TO EXISTING COMMERCIAL BUILDING	
DECK/PATIO/POOL	
ELECTRIC ONLY	
PLUMBING ONLY	
GAS/CHIMNEY/HEAT/GENERATOR	
PERMIT RENEWAL	

DETAILS of RENOVATION/ADDITION/REPAIR INDLUDE:

SPECIFICATION & TYPE of MATERIALS for FOUNDATION, FRAME EXTERIOR, ROOF, & MECHANICAL

NEW CONSTRUCTION & ANY COMMERCIAL PROJECTS REQUIRE: SITE PLAN, DETAILED WORKING DRAWINGS, & ROOF TRUSS CUT SHEET

FOR GAS &/or PLUMBING INCLUDE TYPE OF PIPING

SIGNATURE of CONTRACTOR

SIGNATURE of PROPERTY OWNER

TOTAL AREA of CONSTURUCTION X = SF

NUMBER of BEDROOMS

TOTAL SQUARE FEET of LIVING AREA

NUMBER OF STORIES

ESTIMATED COST of CONSTRUCTION

FOR BUILDING DEPARTMENT OFFICE USE

PERMIT AMOUNT PAID $_____ CASH____ CHECK #_____

PERMIT APPROVED____ DATE_____
PERMIT DENIED____ DATE_____

REASON FOR DENIAL_____

BUILDING OFFICIAL_____