

**Town of East Kingston
New Hampshire**



**APPLICATION FOR PLAN EXAMINATION AND
BUILDING PERMIT**

APPLICANT INSTRUCTIONS: For all applications, complete pages 1, 2 & 3 of this form. Electrical & Plumbing permits are issued separately and must be applied for in person by the licensed professional Performing the work. Use to provide a narrative of the work to be performed and an informal site drawing of your work.

App. Date ____/____/____	Is the Owner the Applicant? (Y/N)_____	Parcel Number (Tax Map & lot) _____
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1. PROPERTY INFORMATION

Street Address _____	Zone _____
Parcel Type: <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Other	

2. OWNER INFORMATION

First Name	Last Name	Phone # / Cell Phone / E-Mail Address
Street Address	City	State Zip + 4

3. CONTRACTORS INFORMATION

	LICENSE NO.	NAME OF CONTRACTOR STREET ADDRESS, CITY & STATE	PHONE
Architect/Engineer			
General Contractor			
Excavation			
Concrete			
Carpentry			
Mechanical			
Roofing			
Masonry			
Drywall or Lathing			
Sprinkler			
Paving			
Fire Alarm			
Lead Abatement			
Asbestos Abatement			

4. CERTIFICATION

I hereby certify that I am the owner of record, or that the proposed work is authorized by the owner of record, and I have notarized statement to that effect. I agree to conform to all applicable laws, codes and ordinances of the Town of E. Kingston and State of New Hampshire. By my signature, I certify that inspection officials of the Town of East Kingston are authorized to enter areas covered by such permit at any reasonable hour.

Signature of Applicant _____

Phone Number _____

5. BUILDING PERMIT APPLICATION

Plan Number:	PROPOSED USE:	
IMPROVEMENT TYPE: <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR/REPLACEMENT <input type="checkbox"/> DEMOLITION <input type="checkbox"/> RELOCATION <input type="checkbox"/> FOUNDATION ONLY	COMMERCIAL/INDUSTRIAL: <input type="checkbox"/> RESTAURANT <input type="checkbox"/> CHURCH <input type="checkbox"/> OTHER PLACE OF ASSEMBLY <input type="checkbox"/> OFFICE <input type="checkbox"/> RETAIL <input type="checkbox"/> EDUCATION <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> HIGH HAZARD	RESIDENTIAL <input type="checkbox"/> SINGLE FAMILY <input type="checkbox"/> TWO FAMILY <input type="checkbox"/> MULTI-FAMILY <input type="checkbox"/> HOTEL / MOTEL STORAGE: <input type="checkbox"/> MODERATE HAZARD <input type="checkbox"/> LOW HAZARD <input type="checkbox"/> OTHER
STRUCTURAL FRAME (CHECK ALL THAT APPLY) <input type="checkbox"/> Steel <input type="checkbox"/> Concrete Other <input type="checkbox"/> Masonry <input type="checkbox"/> Wood		
EXTERIOR WALLS (CHECK ALL THAT APPLY) <input type="checkbox"/> Steel <input type="checkbox"/> Concrete <input type="checkbox"/> Other <input type="checkbox"/> Masonry <input type="checkbox"/> Wood		
ARE ANY STRUCTURAL COMPONENTS TO BE FABRICATED OFF-SITE? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Street Frontage (feet)	# of Stories	Lot Area (sq. ft.)
Front Setback (feet)	# of Existing Bedrooms	Building Area (sq. ft.)
Rear Setback (feet)	# of New Bedrooms	Living Area (sq. ft.)
Left Facing Setback (feet)	# of Full Baths	Basement Area (sq. ft.)
Right Facing Setback (feet)	# of Partial Baths	Garage Area (sq. ft.)
Height above Grade (feet)	# of Garages Bays	Office/Sales Area (sq. ft.)
# of Existing Residential Unit	# of Windows	Service Areas (sq. ft.)
# of New Residential Units	# of Fireplaces	Manufacturing Area (sq. ft.)
# of Elevators / Escalators	# of Parking Spaces	Parking Area (sq. ft.)
Will there be any outdoor lighting: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Est. Start Date <u> </u> / <u> </u> / <u> </u> Estimated Fin Date <u> </u> / <u> </u> / <u> </u> Estimated Construction Cost: \$ <u> </u>		
NOTE: A check made payable to the "Town of East Kingston" must be submitted with the application. Application fee is .50 Per SF of heated space or .25 of unheated space, with a \$50 minimum. Plan review fee is \$50. Any balance due must be paid prior to the permit being released to the applicant.		
NOTE: A SITE PLAN SHOWING THE LOCATION OF ALL PROPOSED CONSTRUCTION MUST BE PRESENTED WITH THE APPLICATION. IF THE BUILDING INSPECTOR IS UNABLE TO DEFINITELY DETERMINE THAT REQUIRED SETBACKS CAN BE MET, HE MAY AT HIS DISCRETION REQUIRE THAT A CERTIFIED PLOT PLAN PREPARED BY A N. H. LICENSED LAND SURVEYOR BE PRESENTED. COMPLETE BUILDING PLANS INDICATING ALL DIMENSIONS, FEATURES, CONSTRUCTION MATERIALS, ETC., MUST BE PRESENTED WITH THE APPLICATION.		

Upon approval, permits may be picked up at the Selectmen's Office. THE PERMIT MUST BE CONSPICUOUSLY POSTED ON SITE.

No new building shall be occupied until the Certificate of Occupancy has been issued by the Building Inspector.

Call or E-Mail to schedule inspections. 603-642-8406 x3 kkaiser@eastkingstonnh.gov

[illegible]

Note all existing buildings as well as all proposed changes, additions, or new structures, indicating their distance from lot lines and from one another.

The N. H. Department of Environmental Services and East Kingston Health Officer must be notified at least ten working days before the demolition activity occurs, whether or not asbestos of any amount is present. For renovation projects, the N.H. Department of Environmental Services and East Kingston Health Officer must be notified at least ten days prior to any asbestos abatement project involving greater than then ten linear feet or 25 square feet of asbestos-containing building material. (RSA 141-E)
EPA Lead Abatement (Renovation, Repair & Painting) Rule: Was this structure built prior to 1978? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, EPA Certified Renovator: _____ Phone: _____
<input type="checkbox"/> No lead-based paint will be disturbed <input type="checkbox"/> Project is less than 6 sq. ft. per room, (interior) or 20 sq. ft. (exterior) <input type="checkbox"/> Abatement Required

Permit Approved: _____

Fee \$ _____

Date: _____ Permit# _____

Selectman

Application check list New Construction

Map & Lot #

Subdivision approval

Site Plan

Plan set to scale: Foundation – Floor – Elevation – Frame detail Size 11x17

List of: conditioned SF Non conditioned SF

Engineering notes

Certification of engineered lumber / steel to be used

Residential / commercial energy form

Waste water ISDS approval

Driveway permit

Foundation cert.

Receipt of paid impact fee

Proof of bonds or other monetary commitment to the town.

Notation of special safety systems required

House#