



TOWN OF STRAFFORD

INCORPORATED 1820

NEW HAMPSHIRE

OFFICE OF THE BUILDING INSPECTOR

12 Mountain View Drive Strafford, NH 03884

MINOR BUILDING PERMIT APPLICATION

Please complete all applicable information listed below

Location of Construction (Address): _____ Map #: _____ Lot #: _____

Applicant/Contractor Name: _____ Phone #: _____

Email Address: _____

Property Owner Name: _____ Phone# _____

Permit Information

Proposed Construction Type: (Check all that apply)	<input type="checkbox"/>	Deck/Enclosed Deck/Farmers Porch/Ramp	
	<input type="checkbox"/>	Shed (Over 100 SF)	
	<input type="checkbox"/>	Small Interior/Exterior Renovations	
	<input type="checkbox"/>	Pool	
	<input type="checkbox"/>	Foundation	
	<input type="checkbox"/>	Other Description:	
Square Feet of Finished Area's:		Square Feet of Unfinished Area's & Decks/Porches:	

Description of work to be performed:

PLEASE PROVIDE PLAN/SKETCH OF NEW PROJECT AND LOCATION ON PROPERTY

As Applicant I swear to the best of my knowledge that all information above is accurate. This signed application constitutes consent on the applicant's part to allow for inspections at the property by Code Enforcement, Assessing Office, & Fire Department. The undersigned hereby agrees that the proposed work shall be done in accordance with all State and Town Building codes, Setbacks, & regulations. Applicant will notify the Building Inspector when ready for final inspection. Fire Department approval may be required. A dwelling may not be occupied without signed Certificate of Occupancy or Use.

Applicant Signature: _____ Date: _____

(Information Below Completed by Building Inspector)

Building Inspector Signature: _____ Date: _____

PERMIT APPROVED PERMIT # _____

Permit Cost (Completed by Building Inspector)

Permit Fee: _____ | Paid: \$ _____

Notes/Conditions: