

55 Constitution Drive
Bedford, NH 03110
472-3838

TOWN OF BEDFORD
BUILDING CODE ENFORCEMENT

APPLICATION FOR
PLAN EXAMINATION AND
BUILDING PERMIT

SUBMISSION CHECKLIST

Application Date ____/____/____	<input type="checkbox"/> DRIVEWAY APPROVAL <input type="checkbox"/> SEPTIC APPROVAL	Is Owner Applicant ___ Y ___ N Applicant email: _____
	<input type="checkbox"/> ENERGY APPROVAL <input type="checkbox"/> SITE PLAN APPROVAL	
	<input type="checkbox"/> 2 SETS OF PLANS	

PROPERTY INFORMATION

Number	Street Name	Bldg. _____ Floor _____	Lot Number	Zoning
Subdivision Name		Use Group	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial <input type="checkbox"/> Other

OWNER INFORMATION

Name or Name of Business			Telephone No.	
Number	Street Name	City	State	Zip

CONTRACTOR INFORMATION

	NAME OF CONTRACTOR	ADDRESS, CITY, STATE, ZIP	TELEPHONE NO.
Architect			
General Contractor			
Electrical			
Plumbing			
Sewer/Septic			
Mechanical			
Sprinkler			
Fire Alarm			

DESCRIPTION OF WORK

Estimated Start ____/____/____ Estimated Finish ____/____/____ Estimated Value \$ _____

DO NOT WRITE IN THIS SPACE - FOR OFFICE USE ONLY

Application Received ____/____/____ Application Complete ____/____/____
Permit To:
Building Permit: <input type="checkbox"/> Granted <input type="checkbox"/> Denied
Hold For: <input type="checkbox"/> Driveway Permit <input type="checkbox"/> Septic System Approval <input type="checkbox"/> Other _____
Permit Fee: Building Department \$ _____ Burners \$ _____ Total Fee \$ _____
Building Permit No. _____ Building Permit Issued: ____/____/____
Approved by: _____ Date: ____/____/____
Building Code Official

BUILDING PERMIT APPLICATION

TYPE OF CONSTRUCTION (Per IBC Chapter 6) CIRCLE ONE 1A 1B 2A 2B 3A 3B 4 5A 5B	PROPOSED USE: ASSEMBLY <input type="checkbox"/> Theater (A-1) <input type="checkbox"/> Night Club (A-2) <input type="checkbox"/> Other _____ <input type="checkbox"/> Restaurant (A-2) <input type="checkbox"/> Church (A-3) <input type="checkbox"/> BUSINESS (B) <input type="checkbox"/> Post 12 th grade <input type="checkbox"/> EDUCATIONAL (Grades 1-12 (E)) <input type="checkbox"/> Day Care Facility <input type="checkbox"/> Mercantile (M) FACTORY <input type="checkbox"/> Moderate Hazard (F-1) <input type="checkbox"/> Low Hazard (F-2) <input type="checkbox"/> HIGH HAZARD (H)	INSTITUTIONAL <input type="checkbox"/> Group Home (I-1) <input type="checkbox"/> Hospital (I-2) <input type="checkbox"/> Jail (I-3) <input type="checkbox"/> Day Care (I-4) RESIDENTIAL <input type="checkbox"/> Hotel, Motel (R-1) <input type="checkbox"/> Multi-Family (R-2) <input type="checkbox"/> Two-Family (R-3) <input type="checkbox"/> Single Family (R-4) STORAGE <input type="checkbox"/> Moderate Hazard (S-1) <input type="checkbox"/> Low Hazard (S-2) <input type="checkbox"/> Utility (U) SPECIAL USE (Specify) _____ _____
Any Wetlands on this Site: <input type="checkbox"/> Y <input type="checkbox"/> N		
Structure Located in Flood Plain <input type="checkbox"/> Y <input type="checkbox"/> N		
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		

FRAME TYPE

Steel	Masonry	Concrete	Wood	Other _____
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EXTERIOR WALLS

Steel	Masonry	Concrete	Wood	Other _____
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	Number of Feet		Number of		Square Feet of
Frontage		Stories		Lot Area	
Front Setback		Bedrooms		Foundation Area	
Rear Setback		Full Baths		Finished Area	
Left Setback		Partial Baths		Basement Area	
Right Setback		Fireplace/Fuel Type	/	Garage Area	
Wetland Setback		Garage - Attached			
Building Height		Garage - Under		Deck	
Number of Residential Units		Garage - Detached			
		Outside Parking			

IS WORK ON THE FOLLOWING SYSTEMS BEING PERFORMED?

Electrical <input type="checkbox"/> Y <input type="checkbox"/> N Electrical service <input type="checkbox"/> New <input type="checkbox"/> Upgrade Size ____ Amps Plumbing (Drain waste & vent) <input type="checkbox"/> Y <input type="checkbox"/> N	Gas Piping <input type="checkbox"/> Y <input type="checkbox"/> N # of shut off valves _____ Fire Alarm <input type="checkbox"/> Y <input type="checkbox"/> N ; Sprinklers <input type="checkbox"/> Y <input type="checkbox"/> N Commercial Hood Exhaust System <input type="checkbox"/> Y <input type="checkbox"/> N
Water Supply: <input type="checkbox"/> Municipal/Public <input type="checkbox"/> Well on Lot Sewer Type: <input type="checkbox"/> Municipal/Public <input type="checkbox"/> Individual Septic	
Number of Burners: _____ Heating Fuel: Electric <input type="checkbox"/> LP Gas <input type="checkbox"/> Natural Gas <input type="checkbox"/> Oil <input type="checkbox"/> Other <input type="checkbox"/>	
Fuel Storage: Size _____ Inside _____ Outside _____ Above Ground _____ Buried _____	

This is to certify that all plans and specifications included with this application will be followed during construction and any changes made shall be only after notifying the Building Code Official. That the proposed work is authorized by the owner or record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction.

NOTE: Two full sets of drawings including structural details and a plot plan of lot showing setbacks to all lot lines must be attached.

APPLICANT: SIGNATURE _____

PRINT

Date _____