

Zoning Permit #: _____
Approved: _____
Appeal Exp: _____



HANOVER, NEW HAMPSHIRE 03755
Department of Planning and Zoning
P.O. Box 483 (603) 643-0708

Building Permit #: _____
Approved: _____
Received: _____

APPLICATION FOR ZONING & BUILDING PERMIT

Commercial and Multi-Family Projects

Property Owner / Agent Information:

Property Owner: _____ Phone: _____

Mailing Address: _____

Designated Project Agent*: _____ Phone: _____

Mailing Address: _____

Email Address: _____

* The Designated Project Agent is responsible for obtaining the required inspections. Agent and subcontractors responsible for work to be inspected shall be present at all inspections. Representation made by Agent will be accepted as though made by the property owner. The property owner shall be bound by any official decision made on the basis of such representation.

Project Address: _____ Tax Map: _____ Lot: _____

Zoning District: _____

Is this property in the Special Flood Hazard Area? Yes No

Does this property have a stream, pond or other wetlands? Yes No

Is the proposed project within 75 feet of a wetland? Yes No

Contractor Information (Name/Address/License No.):

General Contractor: _____

Electrical: _____

Plumbing: _____

Mechanical: _____

Sprinkler / Fire Alarm : _____

Other: _____

Description of Project:

New: _____ Sq. Ft. _____

Addition: _____ Sq. Ft. _____

Alteration: _____ Sq. Ft. _____

Application Fees:

The Building Permit fee is **\$50.00 PLUS** \$5.50 per \$1,000 of construction cost up to a project cost of ten million dollars (with a minimum fee of \$50). For projects exceeding ten million dollars please refer to Town of Hanover Rate and Fee Schedule. Prior to the issuance of a Certificate of Occupancy a final project cost shall be submitted in writing to the Code Office and the permit fee shall be adjusted accordingly.

Code Review:\$ _____ Estimated Cost of Construction: \$ _____

Zoning Review:\$ 35.00

TOTAL APPLICATION FEE:\$ _____

Date Paid: _____

Zoning & Building Permit Submission Check List
Commercial and Multi-Family Projects

A complete set of 100% construction documents, bearing the seal and signature of a New Hampshire licensed design professional (unless exempted by State law), must be submitted with this application, unless a written statement accompanies the application listing all delayed plan submissions and definite dates of subsequent submissions.

Delayed submissions shall be reviewed and approved before proceeding with that specified portion of work. **(Additional fees shall apply.)**

- Accurate Site Plan showing:
 - Lot dimensions **and** setbacks
 - Location of wetland, waterbody, **and** floodplain
 - Location **and** size of all existing structures
 - Location **and** size of all proposed work
 - Location **and** width of road, street, right-of-way, driveway, etc.

- Floor Plans & Elevations showing:
 - Height of new work from finished grade at front
 - Height **and** number of all stories
 - Use designation of all areas, spaces, and rooms

- Interior Work Only:
Floor plans of existing **and** proposed work

- Specific Project Details:
 - Electrical plans
 - Plumbing plans (including riser diagram)
 - Mechanical plans (including heating system data)
 - Structural support

- Energy Code Certification:
Forms & information available at www.puc.state.nh.us/
The PUC may also be reached at (603) 271-2431 and would be happy to answer related questions

- Means of Egress demonstrated
 - Stair details, travel distance, exit access, exit, exit discharge

- Special Details:
 - Fireplace & chimney
 - Swimming pool
 - Fences – locations & heights
 - Excavation & fill

- Approved driveway permit from DPW

- Sewage Disposal Plans:
 - State-approved design for new construction
 - State-approved design for upgrade/additional capacity

Project Specifications

Design Professional in Responsible Charge: _____

NH License #: _____

- | Does this project involve: | YES | NO |
|---|--------------------------|--------------------------|
| • Any assembly use (i.e.: school, church, theater, auditorium, hospital, facility for the elderly, etc.)? | <input type="checkbox"/> | <input type="checkbox"/> |
| • A fire suppression system? | <input type="checkbox"/> | <input type="checkbox"/> |
| • A fire alarm system? | <input type="checkbox"/> | <input type="checkbox"/> |
| • An oil or gas installation? | <input type="checkbox"/> | <input type="checkbox"/> |
| • Changes or alterations to structural elements? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, please specify: _____ | | |
| • Construction or alteration of a structure of more than 2-1/2 stories in height or greater than 4,000 square feet in area? | <input type="checkbox"/> | <input type="checkbox"/> |
| • A change of use? | <input type="checkbox"/> | <input type="checkbox"/> |

Is this building sprinklered? YES NO

Does the construction of the project involve:

- | | YES | NO | | YES | NO |
|-----------------------|--------------------------|--------------------------|---|--------------------------|--------------------------|
| Steel Construction: | <input type="checkbox"/> | <input type="checkbox"/> | Reinforced concrete Construction | <input type="checkbox"/> | <input type="checkbox"/> |
| Masonry Construction: | <input type="checkbox"/> | <input type="checkbox"/> | Off-site Fabrication of Structural Members: | <input type="checkbox"/> | <input type="checkbox"/> |
| Pile Foundations: | <input type="checkbox"/> | <input type="checkbox"/> | Special Inspections: | <input type="checkbox"/> | <input type="checkbox"/> |

Designate the project's construction type according to IBC Chapter 6:

Designate the project's use and occupancy classifications according to IBC Chapter 3:

- If multiple uses, indicate how addressed:
- | | | | |
|--------------------|--------------------------|----------------|--------------------------|
| Non-separated uses | <input type="checkbox"/> | Separated uses | <input type="checkbox"/> |
| Separated bldgs | <input type="checkbox"/> | Accessory uses | <input type="checkbox"/> |

Partial or Phased Approval? (Foundation only or multi-phased project) Yes No
 If yes, provide letter of request.

Temporary Construction approvals required? (Signs, trailers, fencing, etc.) Yes No
Requires separate permitting. Please provide letter of request (indicating time frame needed) and a site plan showing all locations with the supplementary application submittal.

The Zoning Administrator shall act upon an application within 15 days of the submission date. A Zoning Permit shall become void if the rights conferred thereby are not exercised within 24 months from the date of permit issuance.

The Building Inspector shall act upon an application within 60 days upon submission of a **complete** application, and only after the Zoning Administrator determines that the proposed project complies with the Hanover Zoning Ordinance. A Building Permit is valid for 2 years from the date of permit issuance. One-time permit extensions may be granted upon approval of a written request. A Building Permit shall be voided in the event of misrepresentation.

General Conditions:

- Construction shall not commence until a Permit Card is issued by the Code Official. This Permit may be revoked in accordance with Appendix C of the Adopting Ordinance.
- **No portion of the project may be used or occupied until a Certificate of Occupancy/Completion has been issued.** A final inspection will not be conducted until an Application for Final Inspection and Certificate of Completion is filed with the Planning & Zoning Office.
- All signs, awnings & canopies must be permitted separately.
- It is the property owner's responsibility to obtain any additional approval required for the project, including Fire Department, Public Works, Water Department, State Health, food licensing, elevator and lifts, fuel storage, state environmental, etc.

NOTE: Any changes to the application information, including plans, must be submitted in writing for review and approval before work proceeds. Additional fees shall apply.

Owner signature: _____
 (or letter of agent authorization with owner's original signature)

Agent signature: _____

FOR OFFICE USE ONLY

PERMITTED USE:	Zoning § #:	
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Special Exception Required:	§ #		ZBA Case #		Granted:	
Variance Required:	§ #		ZBA Case #		Granted:	

Site Plan Review Required:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	PB Case #		Granted:	
Subdivision Review Required:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	PB Case #		Granted:	

In Accordance with Section 1001.6 of the Zoning Ordinance, this Permit is posted on: ____/____/____ .

The 15-day Appeal Period will expire on: ____/____/____.

Upon issuance of a valid Building Permit, work may begin **at the owner's risk** prior to the expiration of the 15-day Appeal Period.

Permit Approval is Subject to the following Conditions: _____

The Zoning Permit is hereby issued.

 Zoning Administrator

 Date

The Building Permit is hereby issued.

 Building Inspector

 Date