



Major Building Permit Application

Town of Farmington, New Hampshire
Code Enforcement Department
356 Main Street, Farmington, NH 03835
Telephone: (603) 755-2774

Issue Date: _____
Expiration Date: _____
Permit #: _____
(This area for office use only)

Map # _____
Lot # _____
Zoning _____

Location of Construction (Address): _____
Property Owner: _____ Phone: _____
Mailing Address: _____ Cell #: _____
City: _____ State: _____ Zip Code: _____ Daytime #: _____

Contractor: _____ Phone: _____
Mailing Address: _____ Cell #: _____
City: _____ State: _____ Zip Code: _____

Proposed Construction is for: (check only one)

<input type="checkbox"/> New Single-Family Dwelling	<input type="checkbox"/> New Commercial Structure
<input type="checkbox"/> New Two-Family Home	<input type="checkbox"/> Commercial Addition
<input type="checkbox"/> New Multi-Family Dwelling	<input type="checkbox"/> Commercial Alteration
<input type="checkbox"/> Replacement / New Mobile Home	<input type="checkbox"/> Other: _____

Is property within the following? (You must respond to all)

Approved Site Plan (Yes / No)	Shoreland Protection Zone (Yes / No)
Major or Minor Subdivision (Yes / No)	
Flood Hazard Area – per the Flood Insurance Rate Map (Yes / No)	

Is proposed work located within 50 feet of a jurisdictional Wetland Area (Yes / No) –if so please document.

Land Information:

City Water (Yes / No)	Corner Lot (Yes / No)
City Sewer (Yes / No)	

Description of work to be performed: _____

Property Owner Signature _____ Date _____

Page 2 - Section A

EXISTING (or PREVIOUS) CONDITIONS

Existing Use: (land only - if so skip to "B")

Residential___ Commercial___ Mixed Use (both)___

Existing Structures: (Existing Conditions)

Existing # of Buildings on site: _____

Total Sq Ft of existing building(s): _____

Garage Parking: _____ Exterior Parking: _____

Electrical Service: _____

Type of Heat: _____ Fuel Type: _____

of Fireplaces: _____ # of Kitchens: _____

Foundation Type: _____ Building Height: _____

of Full Baths: _____ # of Partial Baths: _____

For Residential Units: (Existing Conditions)

of Units: _____

of Bathrooms: _____

of Bedrooms: _____

For Commercial Units: (Existing Conditions)

of Units: _____

Office Area (sq ft): _____

Office Area (sq ft): _____

Page 2 - Section B

PROPOSED CONDITIONS

Is land in current use? Yes No

If "Yes", you must submit a map to Assessing showing the portion being taken out of current use and attach a copy of the map to this application.

Proposed Use:

Residential___ Commercial___ Mixed Use (both)___

Setbacks:

Front Setback: _____ Left Setbacks: _____

Rear Setback _____ Right Setbacks: _____

Proposed Structures: (Total of existing + proposed)

Proposed # of Buildings on site: _____

Total Sq Ft of proposed building(s): _____

Garage Parking: _____ Exterior Parking: _____

Electrical Service: _____

Type of Heat: _____ Fuel Type: _____

of Fireplaces: _____ # of Kitchens: _____

Foundation Type: _____ Building Height: _____

of Full Baths: _____ # of Partial Baths: _____

For Residential Units: (Total of existing + proposed)

Proposed # of units: _____

Proposed # of Bathrooms: _____

Proposed # of Bedrooms: _____

For Commercial Units: (Total of existing + proposed)

Proposed # of units: _____

Proposed Office Area: _____

Proposed Other Area: _____

ATTACHMENTS AND SUBMITTALS REQUIRED AT THE TIME OF APPLICATION	
For Residential 1 and 2 Family	For Commercial or Multi-unit Residential
Site Plan <input type="checkbox"/>	Site Plan – Approved Site Plans Must be Certified Prior to Issuance of Building Permits. <input type="checkbox"/>
Driveway Permit [Contact DPW (603) 755-4884] <input type="checkbox"/>	Driveway Permit [If Required] [Contact DPW (603) 755-4884] <input type="checkbox"/>
N.H. Approved Septic Design [If Required] <input type="checkbox"/>	N.H. Approved Septic Design <input type="checkbox"/>
Approved Storm Water Management Plan [Contact DPW (603) 755-4884] <input type="checkbox"/>	Approved Storm Water Management Plan [Contact DPW (603) 755-4884] <input type="checkbox"/>
Two (2) full sets of building plans <input type="checkbox"/>	Three (3) full sets of plans [Stamped When Required by RSA 310 -A] <input type="checkbox"/>
P.U. C. Prescriptive Compliance Application, Res Check Compliance Application, or <input type="checkbox"/>	Letter of Energy Compliance From Design Prof. [May Use Residential Compliance Options to a Maximum building size of 4000 Square Feet] <input type="checkbox"/>
Have you filled out page two Section A and B completely? <input type="checkbox"/>	Have you filled out page two Section A and B completely? <input type="checkbox"/>
Footing Certification – As required by Dept. This is Due Prior to Foundation Inspection or Issuance of Building Permit. <input type="checkbox"/>	Footing Certification – This Is Due Prior to Foundation Inspection or Issuance of Building Permit. <input type="checkbox"/>
All Precedent Conditions of the Notice of Decision that was Approved by the Planning Board are met. <input type="checkbox"/>	Statement of Special Inspection [IBC Section 1705] [If Applicable] <input type="checkbox"/>
Fire Department – Fire Protection Plans and Review Fee Submitted In Addition to Building Permit/Fee [If Applicable] <input type="checkbox"/>	Fire Department – Fire Protection Plans and Review Fee Submitted In Addition to Building Permit/Fee. <input type="checkbox"/>

Please be advised, the order of inspections, for the **Building Inspector Only**, are as follows:

- | | |
|--|-------------------------------------|
| 1. Reinforcing Steel Prior to Placement of Concrete. | 5. Rough Electrical, Plumbing & Gas |
| 2. Foundation / Pier Depth | 6. Insulation |
| 3. Foundation Walls – Damp proofed & Drains | 7. Final Inspection |
| 4. Rough Framing | |

Note: Not all inspections may apply to every situation and additional inspections may be required as needed. Electrical, Plumbing and Mechanical Work all require additional inspections. **All oil fired heating systems as well as wood stoves & pellet stoves must be inspected by the Fire Department.

Certification of Accuracy: As the owner/owners agent of record, I certify that all information contained within this application is true and accurate to the best of my knowledge and belief.

Certification of Compliance: I hereby certify that I am familiar with all pertinent codes relating to the above specified work, and that all work shall be performed in compliance with these codes.

Inspections: This signed application constitutes consent on the applicant's part to allow for inspections at the property by the Code Office, Assessing Office and any other required City Staff. Appointments for inspection require 48-hour advance notice. Any work that is covered prior to the inspection may be required to be removed for inspection.

Certificate of Occupancy (C/O): A C/O must be issued PRIOR to any occupancy of residential and/or commercial structures. A Certificate of Occupancy shall be clearly displayed in all structures of non-residential uses. For Commercial Projects: As-Built Drawings must be submitted prior to issuance of a C/O.

Permits are non – transferable.

Applicants are advised that the making of a false statement on this form is a criminal offense.

Cost of Construction: _____ Permit Fee: _____

Owner: _____ Date: _____

Contractor: _____ Date: _____

*****DO NOT WRITE BELOW THIS LINE*****

Paid By: _____ CASH CHECK # _____

Received By: _____ Date: _____

THIS PERMIT IS: ISSUED with the following conditions: DENIED for the following reason(s):

Approved By: _____ Date: _____

Construction Plan

Instructions:

Provide sufficient information as to the proposed structure.

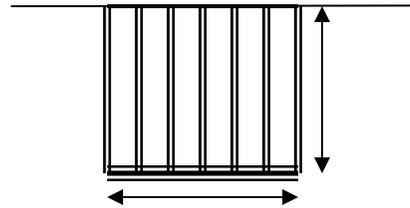
- 1) The Size.
- 2) If attached to the house, where and how?
- 3) Show Sketch below of how structure is to be framed. (Show the spans, lumber size, beam location, etc.)

Please note that some minor construction may require a full set of building plans.

Sample Plan:

Deck Framing

House



Signature _____

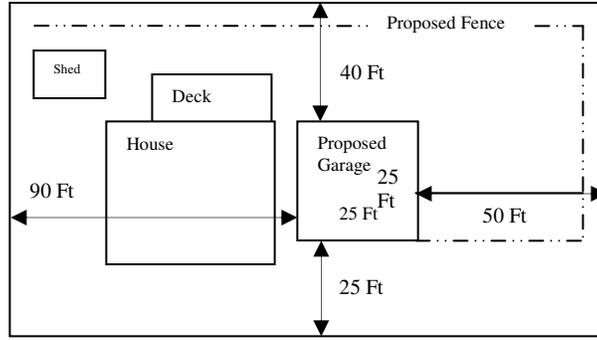
Date _____

Sketch Plan

Instructions:

- 1) Show the Property lines and road(s).
- 2) Show the proposed Structure and all existing structures.
- 3) Show the Measurements from the proposed structure to all lot lines, measure straight through existing structures if needed.
- 4) Include the dimensions of the proposed structure.
- 5) If installing a fence – show the location.

Sample Plan:



Street

Signature _____

Date _____

Technician Permits

Plumbing, Electrical, Gas, Oil, Mechanical

**All Technicians must pull their own permits and have proof of Licensing and/or Certification*

Please list your Technicians:

Plumbing -

Name / Business

Mailing Address and Phone Listing

Electrician -

Name / Business

Mailing Address and Phone Listing

Gas / Propane -

Name / Business

Mailing Address and Phone Listing

Oil / Mechanical -

Name / Business

Mailing Address and Phone Listing

**TOWN OF FARMINGTON
APPLICATION FOR A DRIVEWAY PERMIT**

Prior to construction, alteration, repair, or relocation of any driveway, entrance, or access in Farmington, this application shall be filed and approved.

Date of Application: _____ Map: _____ Lot: _____

Public/Private Road to Driveway: _____ Length of Driveway: _____

E-911 Street Address: _____

Name of Property Owner(s): _____

Address: _____ Telephone #: _____

Name of Applicant, if different from Owner: _____

Address: _____ Telephone #: _____

Contractor Name: _____ Telephone #: _____

Will this driveway provide access to more than one living unit or use? Yes No

Are any State or Federal approval permits required? Yes No If so, please attach.

Upon approval of the location of the entrance approach, I agree to the following:

1. The grade of the approach at the location to be agreed upon is to be such as will permit a safe and controlled approach to the highway at all seasons and so designed that no water will discharge from the approach upon the surface of the highway.
2. Such drainage structures as are necessary to maintain existing highway drainage are to be furnished by me, and are to be of such design as will meet the following Town of Farmington's specifications.
 - A. Minimum diameter of culvert shall be 12 inches with larger size to be determined on case-by-case basis.
 - B. Minimum length of culvert shall be 30 ft.
 - C. Minimum depth of cover over culvert shall equal the diameter of the culvert (ie. 12" culvert - 12" gravel).
 - D. Rock headers shall be constructed at each end of culvert to protect and mark end of culvert.
 - E. Approved types of culvert:
 1. ADS stiff ribbed with smooth wall inside
 2. Galvanized spiral
 3. Aluminum spiral
 - F. Temporary culverts shall be removed promptly and the natural drainage restored to the satisfaction of the Public Works Department.

Signature of Applicant

Signature of Property Owner

Any alterations of the above proposed permit must have written approval of the Director of Public Works.

Permission to construct an entrance approach at the location agreed upon above is hereby granted:

Public Works Director Date: _____

Approval by Public Works Director required prior to issuance of Certificate of Occupancy:

Public Works Director Final Inspection Date: _____

**TOWN OF FARMINGTON: RESIDENTIAL OR COMMERCIAL
SEWER SERVICE CONNECTION PERMIT**

To the Town of Farmington, New Hampshire:

The undersigned, being _____ of the property
Owner, Owner's Agent

Located at: _____ does hereby request a permit to install and
(Number) (Street)

connect a water service to serve _____
Map & Lot, Residence, Commercial Bldg., Apartment, Etc.)

at said location:

- 1) If apartment building, give number of apartments _____
- 2) If commercial building, give estimate of gallons of water usage per day _____
- 3) The Name, address and phone number of the person or firm who will perform the proposed work: _____
- 4) Plans and specifications for the proposed building are enclosed herewith. In consideration granting of this permit, the undersigned agrees:
 1. To pay the current fee per equivalent dwelling unit.
 2. To pay the current installation and inspection fee.
 3. To accept and abide by all provisions of the Farmington Water Department Rules & regulations, and of all other pertinent ordinances or regulations that may be adopted in the future.
 4. To maintain the water service at no expenses to the Town.
 5. To notify the Water Department upon completion of installation and prior to backfilling.

Date: _____

MAP & LOT _____

Connection Fee Paid: **\$3220.00** **Paid:** **YES** **NO**

Applicant Signature: _____

Address: _____ Phone Number _____

Water/Sewer Superintendent Signature _____

**TOWN OF FARMINGTON: RESIDENTIAL OR COMMERCIAL
WATER SERVICE CONNECTION PERMIT**

To the Town of Farmington, New Hampshire:

The undersigned, being _____ for the property
Owner, Owner's Agent

Located at: _____ does hereby request a permit to install and
(Number) (Street)

connect a water service to serve _____
Map & Lot, Residence, Commercial Bldg., Apartment, Etc.)

at said location:

1. If apartment building, give number of apartments _____
2. If commercial building, give estimate of gallons of water usage per day _____
3. The Name, address and phone number of the person or firm who will perform the proposed work: _____
4. Plans and specifications for the proposed building are enclosed herewith. In consideration granting of this permit, the undersigned agrees:

1. To pay the current fee per equivalent dwelling unit.
2. To pay the current installation and inspection fee.
3. To accept and abide by all provisions of the Farmington Water Department Rules & regulations, and of all other pertinent ordinances or regulations that may be adopted in the future.
4. To maintain the water service at no expenses to the Town.
5. To notify the Water Department upon completion of installation and prior to backfilling.

Date: _____

MAP & LOT _____

Connection Fee Paid: **\$2910.00**
Meter Installation Fee Paid: **\$315.00**

Paid:	YES	NO
Paid	YES	NO

Applicant Signature: _____

Address: _____ Phone Number _____

Signature: Director of Water Department

The information regarding race, ethnicity, and sex designation solicited on this application is requested in order to assure the Federal Government, acting through the Rural Housing Service that the Federal laws prohibiting discrimination against tenant applications on the basis of race, color, national origin, religion, sex, familial status, age, and disability are complied with. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, the owner is required to note the race, ethnicity, and sex of individual applicants on the basis of visual observation or surname.

Ethnicity:

Hispanic or Latino _____

Not Hispanic or Latino _____

Race: (Mark one or more)

1. American Indian/Alaska Native _____
2. Asian _____
3. Black or African American _____
4. Native Hawaiian or Other Pacific Islander _____
5. White _____

Gender:

Male _____

Female _____



Consumer



Regulatory



Safety



Electric



Gas/Steam



Telecom



Water/Sewer

Residential

For certification of compliance with the Residential Energy Code, fill out the EC-1 form and submit it to the PUC.

Please mail your applications to:

New Hampshire Public Utilities Commission
21 S. Fruit St, Suite 10
Concord, N.H. 03301-2429

Or **FAX** to 603 271-3878

Or scan and **e-mail** to energycodes@puc.nh.gov

REScheck Software Tool

REScheck should be used only if your structure will not meet the code requirements laid out in the EC-1 form.
NOTE: REScheck will not allow trade-offs for high efficiency heating systems.

If you wish to use the software approach to prove compliance of residential structures with the code you should download the latest version of [REScheck Software](#). Click on **Code** on the toolbar and set to **2009 IECC**.

Then set the State to **New Hampshire** and City to the municipality where the project is planned.

You MUST submit page 1 of the EC-1 form and simple building plans with a REScheck filing.

Alternative means for showing compliance

- [Architect's or Engineer's Certification](#)
- [Modular Home](#)

For questions on the new code or help with these applications you may contact us at 603-271-6306 or e-mail EnergyCodes@puc.nh.gov

**2010 New Hampshire
Residential Energy Code Application**
for Certification of Compliance for New Construction, Additions or Renovations
(EC-1 Form)
Minimum Provisions Effective Date April 1, 2010

Owner/Owner Builder: Company Name: (if applicable)			General Contractor: Company Name		
Name:			Name:		
Mail Address:			Mail Address:		
Town/City:	State:	Zip:	Town/City:	State:	Zip:
Phone:			Phone:		
E-Mail:			E-Mail:		
Location of Proposed Structure:			Type of Construction:		
Tax Map #:		Lot #:	<input type="radio"/> Residential <input type="radio"/> Small Commercial <input type="radio"/> New Building <input type="radio"/> Renovation <input type="radio"/> Addition <input type="radio"/> Thermally Isolated Sunroom <input type="radio"/> Modular Home: the site contractor must submit this form detailing supplementary rooms and Floor and/or Basement insulation unless the floor insulation is installed or provided by the manufacturer and no heated space is added.		
Street:			Total New Conditioned* Floor Area: _____ ft ²		
Town/City:	County:				
Zone 5 <input type="radio"/> Cheshire, Hillsborough, Rockingham or Strafford Zone 6 <input type="radio"/> All other counties			Basement or Crawl Space: (*a conditioned space is one being heated or cooled containing un-insulated ducts or with a fixed opening into a conditioned space and it must be insulated) Conditioned? <input type="radio"/> Yes <input type="radio"/> No <input type="checkbox"/> Full Basement <input type="checkbox"/> Walk Out Basement <input type="checkbox"/> Slab on Grade <input type="checkbox"/> Other _____		
Heating System: (if new system is being installed) Annual Fuel Use Efficiency (AFUE): _____ % Fuel Type(s): <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane (LP) <input type="checkbox"/> Electric <input type="checkbox"/> Wood <input type="checkbox"/> Other _____ Heating System Type: <input type="checkbox"/> Hot Water <input type="checkbox"/> Hot Air <input type="checkbox"/> Stove <input type="checkbox"/> Resistance <input type="checkbox"/> Heat Pump <input type="checkbox"/> Geothermal			Form Submitted by: <input type="checkbox"/> Owner <input type="checkbox"/> Builder <input type="checkbox"/> Architect <input type="checkbox"/> Designer <input type="checkbox"/> Other _____		
Structure is EXEMPT because: <input type="checkbox"/> Mobile Home <input type="checkbox"/> On an historic register <input type="checkbox"/> Low energy use (less than 1 watt/ ft ²)					

4/10

I hereby certify that all the information contained in this application is true and correct, and construction shall comply in all respects with the terms and specifications of the approval given by the Public Utilities Commission and with the New Hampshire Code for Energy Conservation in New Building Construction.

Signature _____ Print Name _____ Date _____

Official Use Only:		
Date Complete Application Received:	Approved by:	Date:
Approval Number:	Stamp:	
	Reason: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> Other: _____	
	Notice: <input type="checkbox"/> e-mail <input type="checkbox"/> v.m. Date: _____	