

Town of Belmont, NH

BUILDING PERMIT APPLICATION

- Applications and Assistance are available in the Town Hall Land Use office (603-267-8300x3).
- Completed applications are usually processed within 14 business days. Building construction plans are required.
- New or upgraded driveways, including (re)paving an existing driveway require a permit.
- Applicant is responsible to assure all information correct.
- Permits expire if not substantially acted upon and at least one inspection has not occurred within 6 months.

INSPECTIONS REQUIRED: Applicant is required to call the Building Inspector for all required inspections (setback, foundation, framing, rough plumbing, rough electrical, insulation and final). Failure to obtain a "certificate of occupancy/use"/final inspection for ALL completed construction can/will delay the issuance of this/future permits. Fees are due with application, checks made payable to "Town of Belmont". Fees for approved applications are non-refundable.

1.	. Land Owner's Name:							
	Mailing Address:			e-mail:_				
2.	Building Owner's Name (If different):			Tele:				
	Mailing Address:			e-mail:_				
3.	. Applicant's Name (If different):			Tele:				
	Mailing Address:			_e-mail:				
4.	Contractor:			Tele:				
	Mailing Address:			e-mail:				
5.	Plumber:			_Lic.#:	_Tele:			
6.	Electrician:			Lic.#:	Tele:			
7.	Mechanical Installer	:		Lic.#:	Tele:			
8.	Location of work: Str	reet # & Name:			Tax Map #:	Tax Lot#:		
9.	Total lot acreage:	Total lot frontage on Cla	ss V Road or better:	Zoning District:_	Is this a con	dominium? □YES □NO		
10.	Is lot located:							
	 a. □ YES □ NO Under a Current Land Use (CLU) Assessment (portion to be developed)? If "YES" an existing CLU map mus be on file with town and a revised copy must accompany this application. b. □ YES □ NO In 100 year Flood Plain (check maps in Town Hall)? c. □ YES □ NO Within 250' of a public water body? (Attach copy of NH DES Shoreland Permit) d. □ YES □ NO Within Belmont Aquifer Protection Zone? 							
11.	List all uses and structures currently on property:							
12.	2. Explain any work proposed for driveway(s):							
13.	Briefly explain current proposal(s):							
14.	Type of Proposed Improvement (Check all that apply)							
	☐ New structure☐ Foundation only	☐ Addition☐ Alteration/Repair	☐ Demolish on site* ☐ Relocate off site*	□ Other(speci	fy):			
	Asbestos, le	ad paint and/or hazardous	s materials encounter	ed must be dispose	d of by a licens	ed professional		
	*Demolition/Relocation applications must be signed by land <u>and</u> unit owner (<u>even if same</u>). Attach Tax Collector's removal perm							
15.	5. Is this a:proposed project; oran after-the-fact application (work already started)?							
16.	Building/construction	n plans attached? YES	□NO					

Removals and Demo	Olitions: Size: W x L Mobile) Homes: Model Name: Mfg Year:				
 □ Demo on site □ Relocate off site • Applications for den • Must be accompanion 	By (person) To (Location) molitions and relocations must be signed by Structure Owner and Land Owner (even if the sa led by the Town Clerk/Tax Collector's authorization to move.	<u>ıme</u>)			
	e demolished or relocated until all permits are approved.				
11 1	acture/Addition:				
☐ Single Far ☐ Accessory	& Residential Accessory Projects mily □ Two-Family □ Multi-family No. of units □ Accessory Building □ Garage y Dwelling Unit (Requires questionnaire) □ Pool (□Seasonal or □Permanent) (Seasonal limited to 5/1-10/1 ann (Type) □ Other:	ually)			
<u>OR</u>					
	al, Industrial & Institutional Projects se & Structure:				
Manufactured (Mobile) Hon	me: H.U.D. #: Mfg name: Mfg year*:				
	Was there previously a unit on this site: ☐Yes ☐No If so: Owner's Name: ☐Date removed				
*Applications for used units m (issued by Town where unit w	nust be accompanied by the Town Clerk/Tax Collector's authorization to remove unit from prior lo	cation			
Total Value of Improvement	t: \$ (REQUIRED – estimate is acceptable.)				
Foundation Information:	□ Concrete and □ Full □ Crawl Space □ Block □ Slab □ SonaTube □ Other □ Other:				
NH Residential Energy Code	e: For all Residential New Construction, Additions or Renovations involving Living Space, App must submit a Certificate of Compliance Application (https://tinyurl.com/28jdn6fd) to the Tow this building permit application.				
Principal Type of Frame:	☐ Wood frame ☐ Masonry (wall bearing) ☐ Structural steel ☐ Reinforced concrete ☐ Other:				
Principal Type of Heating:	☐ Gas ☐ Solar ☐ Electric ☐ Coal* ☐ Oil* ☐ Interior Wood/Pellet* *Requires Fire Department permit				
Sewage Disposal:	☐ Town or community system (New Connection-attach copy of permit) ☐ Private (septic tank,etc) (NH DES Septic Approval #:)				
Water Supply:	☐ Town or community system (New Connection-attach copy of permit) ☐ Private (well, cistern)				
Dimensions:	Existing Proposed Structure Structure/Addition Info Only				
	Number of stories Total building height Total square footage (exterior dimensions) Bldg width (include on sketch) Bldg length (include on sketch) Does upper story overhang lower story? Number of bedrooms				

Complete SEPARATE sheet on each proposed structure or addition included on this application (Use Additional Sheets as Necessary)

Proposed Use:	Residential & F	Residential Accessory Projects				
		☐ Two-Family ☐ Multi-family No				
	•				manent) (Seasonal limited to 5/1-10/1 annually)	
	☐ Addition (Typ	oe) □ Other:		 		
	<u>OR</u>					
	Commercial, Ir	ndustrial & Institutional Projects				
		Structure:				
N/	M-1-9-) II	шир #	MC		MC*	
Manufactured (Mobile) Home:	H.U.D. #:			Mfg year*:	
		Was there previously a unit on this If so: Owner's Name:	site.		Date removed	
*Applications fo	r used units must		Tax Coll	lector's authori	ization to remove unit from prior location	
		reviously located).	Tun Con	icetor s address	ization to remove unit from prior focusion	
		(DECLYDED				
Total Value of I	mprovement: \$	(REQUIRED – estin	nate is a	cceptable.)		
Foundation Info	ormation:	☐ Concrete and ☐ Full		□ Crawl Spa	ce	
				☐ SonaTube		
			:			
NH Residential	Energy Code:				vations involving Living Space, Applican s://tinyurl.com/28jdn6fd) to the Town with	
Principal Type	of Frame:	☐ Wood frame ☐ Masonry (wall ☐ Reinforced concrete ☐ Other			steel	
Principal Type	of Heating:	☐ Gas ☐ Solar ☐ Electric		* □ Oil* es Fire Departme		
Sewage Disposa	l:	☐ Town or community system (New			=	
		☐ Private (septic tank,etc) (NH DES Septic Approval #:)				
Water Supply:		☐ Town or community system (New ☐ Private (well, cistern)	v Connection	on-attach copy of	permit)	
Dimensions:				Existing	Proposed	
				Structure	Structure/Addition	
				Info	Only	
		Number of stories				
		Total building height			_	
		Total square footage (exterior dimer	nsions)			
		Bldg width (include on sketch)				
		Bldg length (include on sketch)	0			
		Does upper story overhang lower sto Number of bedrooms	ory?			
		Number of hadrooms				

MUST BE SIGNED BY LAND OWNER AND BUILDING OWNER

(For demolitions and relocations signatures in both places are required)

LAND OWNER: I hereby certify that to the best of my knowledge this information is valid and that there is no violation of the approved ordinances, codes, and/or regulations of the Town of Belmont. I authorize the Members of the Board or their staff to enter onto this property and take both land and aerial photos for the purposes of this discussion.

Land Owner's Signa	fure·		Da	ate:
(For Campground, C	ture: Condominium or other non-indiv	idual form of ownership, sig	nature of representative of A	Association requir
work shall conform to Ni restrict any erosion or so violation of the approved	I hereby certify that the proposed H Department of Environmental edimentation. I hereby certify the ordinances, codes, and/or regulary and take both land and aerial p	Services Regulations, and Be at to the best of my knowle tions of the Town of Belmon	est Management Practices sl dge this information is valid t. I authorize the Members of	hall be implemented id and that there is
Building Owner's Sig	gnature:		Da	ate:
CHOOSE ONE	<u>):</u>			
E-Ma	il me the permit. (E-mail	address:)
☐ Call r	ne when ready and I will pi	ick up. (Name/Tele. No	to call:)
☐ Mail*	**. (Mailing address:)	
**mu	**. (Mailing address: ust include self-addressed	stamped envelope with	n permit application*	*
Proposal complies with a	applicable Land Use Regulations on (or authorized signer)	OFFICE USE ONLY	Date:	
i iaining board Chairina	iii (oi autiioi ized signei)		Date	
Conditions:				
Conditions:				
Date Variance/Special E	xception Granted:	Purpose/Conditions:		
Date Variance/Special E	xception Granted: I	Purpose/Conditions:	*******	******
Date Variance/Special E	xception Granted: I	Purpose/Conditions:	********	******
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Date Variance/Special E	xception Granted: F **************** Example Only - Se	Purpose/Conditions:e*******************************	**************************************	*****
Date Variance/Special E	Exception Granted:I ************** I Example Only - Se Septic System	Purpose/Conditions:e*******************************	**************************************	******
Date Variance/Special E	xception Granted: ************* Example Only - Se Septic System	Purpose/Conditions: ************** e Other Instructions on 180' Proposed 0	**************************************	******
Date Variance/Special E	Exception Granted:I ************** I Example Only - Se Septic System	Purpose/Conditions: ************** e Other Instructions on 180' Proposed 0	**************************************	******
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Date Variance/Special E	xception Granted: ************* Example Only - Se Septic System	Purpose/Conditions: *********** The Other Instructions on 180' Proposed of	**************************************	******
Date Variance/Special E ************************************	xception Granted: ************* Example Only - Se Septic System	Purpose/Conditions:	**************************************	*****
Date Variance/Special E ************************************	Existing House Exception Granted: Example Only - Se	Purpose/Conditions:	**************************************	**************************************

Date:

PLOT PLAN INSTRUCTIONS

A Plot Plan to be provided below. Include the following information on each proposed structure/addition. A sample sketch is shown above.

North arrow	All proposed structures and additions showing overall dimensions					
Boundaries of lot with dimensions in feet	Location of any wetlands, floodplain, streams, etc. on site					
Include all proposed decks, landings, exterior stairs, porches	Existing structures on lot: include septic system, drainage structures,					
and overhangs	wells and utilities					
Names & locations of roads adjacent to lot	Location of any on-site or adjacent cemeteries or burial sites					
Setback (distance from structure) in all directions to:	Setback (distance from structure) in all directions to:					
All property lines (front setback is measured from property line, not from the road)						
All waterbodies and wetlands						
Location of existing & proposed driveways (Driveway application required for new/expanded/paving existing/change of use)						
Measuring Setbacks in campgrounds and manufactured home parks – Add the following:						
Nearest structure on adjacent sites (identify type of structure), roads, and exterior property lines of the park or campground						
Any additional information that will adequately describe the proposed work						
Additional Information required for Accessory Apartment and Home Occupation Applications						

COMPLETE PLOT PLAN REFER TO INSTRUCTIONS AND EXAMPLE ABOVE – INCOMPLETE PLOT PLAN WILL DELAY PERMIT

Belmont Building Fee Schedule - Calculation Form

Calculation and Fee to be Submitted with Application Fees for approved applications are non-refundable

Af	After-the-fact building permit amounts doubled for first offense; tripled thereafter. Fees							
re	fun	dable only on denial of permit. Fees due upon application. No fee for structures =<16sf.						
		tions/additions during construction are to be reviewed and may be subject to additional	_		_			
fee	es L	ipon approval.	Fees	Multiplier	L Due			
Bı	uilo	ling Permits			uene en			
A.		Single and Two-Family Dwellings	300.00	0.10()				
B.		Multi-Family Dwellings	400.00	0.10()				
C.		Manufactured Home	150.00					
D.		Recreational Vehicles (=>320 sf) placed on a lot or site for use (per sf)	90205052505200200	0.15 ()				
	10000000 1000000		menendersenen Resource	and an arms of the second of t				
E.	_	Residential:		I				
_	1.	Open Deck (any size) & Accessory Structure (< 300 sf)	25.00					
_	2.	Enclosed Addition (any size) & Accessory Structure (=> 300 sf)	75.00					
=97=31/11	3.	Alterations/Renovations w/in existing footprint/useable space	100.00	0.03 ()				
					ti ann ann amh ann ann ann ann ann ann ann an			
F.	_	Commercial, Industrial, Institutional (New Construction)	500.00					
	1.	Additions < 2000 sf	250.00					
	2.	Additions => 2000 sf	500.00					
	3.	Accessory Structure (any size)	150.00					
	4.	Alterations/Renovations w/in existing footprint/useable space	100.00	0.25 ()				
G.	2011221311	Cell Tower	150.00	7777772177777777777777				
H.		Pool	Mistales interference Mistales (Mistales Mistales (Mistales Mistales (Mistales Mistales (Mistales (Mistales (Mi	กระทายกระทารักษาสมาชากระท	<u>เรือเลือดเลยเลงเลยคนเลยเลยให้เอดและและเลย</u>			
	1.	Above ground and seasonal	25.00					
_	2.	In-ground	35.00					
l.	\vdash	Demolition* (No fee for Membrane Structure)	25.00					
J.		Membrane Structure	25.00	0.05 ()				
K.		Sign (No fee for Home Occupation Sign)	25.00					
L.		Driveway	25.00					
M.		Retaining Walls (over Four (4) feet in height)						
	-	<100sf	25.00					
monte.	2.	>100sf	50.00	and the second second				
					and a language of the control of			
N.	\vdash	Change of Use/Tenant Permit	25.00					
Ο.		Home Occupation Review	0.00					
			50.00					
P.	\vdash	Electrical Permit*	50.00					
Q.		Mechanical Permit*	50.00					
R.	\vdash	Plumbing Permit*	50.00					
S.		Generator Permit	50.00	insulasinsulgarishdəmə				
nion		SUB TOTAL	ar a Lucius ancione					
	\vdash	AFTER THE FACT MULTIPLIER		x2				
	Н	*No charge for a Demolition, Electrical, Mechanical or Plumbing permit obtained as part of a Buildin	g Permit					
		Office Use Only:						
		Received:						
		Amount:						
		Date: Payment Method: Check Cash Other			1/1/2019			