

TOWN OF WOLFEBORO
COMMERCIAL BUILDING PERMIT
APPLICATION

CODE ENFORCEMENT 569-5970

www.wolfeboronh.us

Permit Fee: \$ _____ Permit Number _____ Date Received Stamp: _____

Property Information: Zoning District _____ Tax Map #: _____

Physical Location of project : _____
 Street name & number (or description)

Owner Information: Email: _____ @ _____

Name _____ Telephone #: _____

Legal Mailing Address: _____
 Street or PO Box Town/City State Zip

*The undersigned hereby applies for permission to make building improvements as described in this application and attached documentation. All construction to be completed in accordance with the Wolfeboro Planning and Zoning Ordinance, Local & State Building Codes, and all applicable regulations. I understand that I must apply for and receive a **Certificate of Occupancy** prior to occupying or using the building.*

Date: _____ 20__

 Signature of Owner

Owner's Agent (letter of authorization required): Email: _____ @ _____

Signature of Owner's Agent _____ Date: _____ 20__

Print Name _____ Telephone #: _____

Mailing Address: _____
 Street or PO Box Town/City State Zip

<p style="text-align: center;"><i>Construction not authorized until permit is approved 24-hour notice must be given for inspection appointment Approved under 2018 International Building Code</i></p>	<p>Office use only: DATE APPLICATION COMPLETED</p>
<p>Most commercial buildings must be designed by a licensed Architect or Engineer per RSA 310A:52</p> <p> <input type="checkbox"/> SITE PLAN <input type="checkbox"/> FLOOR PLANS & ELEVATIONS <input type="checkbox"/> ENERGY CODE CERTIFICATION LETTER <input type="checkbox"/> SECTION DRAWING <input type="checkbox"/> WETLANDS ASSESMENT LETTER <input type="checkbox"/> ADA CERTIFICATION </p>	

Use & Occupancy: Building Code _____ Fire Code: _____

Conditions of approval: _____

 Building Official Date of Approval: _____

Zoning	Fire/Rescue	Wolfeboro Electric	Public Works	Building Department

