Permit #:	Fee Paid: \$	
	CHK #:	

APPLICATION for CERTICIATE OF ZONING & CODE COMPLIANCE

Town of Sanbornton, New Hampshire

Applicant Information:
Applicant (Property Owner):
Mailing Address: E-mail:
Telephone: Residence:Cell:Work:
Contractor: Contractor Phone:
Proposed Project Information:
Project Location:Tax Map & Lot #:
Zoning District: Land in Current Use? Y: N:
Overlay District: Aquifer Wetland Shorefront Floodplain Steep Slope
Brief Project Description:
Residential Project:
Single Family Two Family Multi (3+) Family Accessory Apartment
Manufactured Housing/Year of Manufacture: Make/Model:
Additional Bathrooms Additional Bedrooms Additional SF
Building LengthFt Building WidthFt Building Height
Residential Addition: Deck Porch Garage Other (Specify):
Accessory Building or Use: Barn Shed In-Ground Pool Other:
Commercial (Specify):
Industrial (Specify):
Renewals & Demolitions:
Change in Use of Property:
Property Information:
Lot Size Acres Road Frontage Feet Lake Frontage Feet
☐ Drilled Well ☐ Dug Well ☐ Spring Water ☐ Lake Water ☐ Shared Well
Setbacks - List number of feet the proposed Project is from the following:
Front Property Line Ft. Left Property Line Ft. Wetlands Ft.
Rear Property Line Ft. Lake/Pond Ft. Flood Plain Ft.
Rear Property Line Ft. Lake/Pond Ft. Flood Plain Ft. Right Property Line Ft. Streams Ft. Other Structures Ft.
WARNING: Please be advised that inspections of footings (for projects which require foundations) will be
scheduled by appointment. Applicant must contact Zoning Enforcement Officer to schedule inspection. If you
continue project upon completion of footings & before fotting inspection, you do so at your own risk. If footings are
not compliant with Zoning setback requirements, a "Stop Work Order" will be issued & the project halted until compliance has been attained. Applicant's acknowledgement of this warning is required for completion of this
NOTE: If no appointment is made, the Zoning Enforcement Officer will make inspection approximately
6 months after issuance of the Certificate of Zoning Compliance.
Acknowledgement of Applicant: Date:
Acknowledgement of Applicant

MUST OBTAIN THE FOLLOWING BEFORE CERTIFICATE OF ZONING COMPLIANCE ISSUED: Check those that Apply:

Zoning Board of Adjustment Approval (Submit copy of Variance or	Special Exception)
Planning Board Approval: Site Plan Review Erosion Cor	ntrol Class VI/Private Road
Historic District Commission Approval:	
Sanbornton DPW Driveway Permit Approval #:	
NH DOT Driveway Permit Approval #:	
NH DES Alteration of Terrain Permit #:	
NH DES Dredge & Fill Permit #:	
NH DES SWQPA Permit Approval #:	
NH DES Septic System Approval #:	for bedrooms
WRBP Sewer Service Connection Approval: New Ex	xisting Additional Hook-Up
NH PUC Energy Code Compliance Approval #:	· —
NH DES Asbestos Demolition/Renovation Notification Form Re	eceived by ZEO Date:
Sanbornton Fire Dept. Approval:	· <u></u>
MUST OBTAIN THE FOLLOWING BEFORE LIFE-SAFETY CERTICIA Check those that Apply:	ATE OF OCCUPANCY ISSUED:
Heating Appliance Installation Application Permit #:	
E-911 Section: For E-911 numbering, include footage from both prop Measurement from both property lines to center of driveway:	•
Dian Banninamanta.	
Plan Requirements:	huildings wall sentia system and
 Plot plan must be submitted showing property boundary, all driveway. Show any streams, ponds, lakes or wetlands. (NOT 	•
indicate the area left out or draw a detailed map of what needs	
2) Floor plans showing room dimensions to the nearest foot: In	•
3) Building elevation drawings showing front, right, left and rea	
4) Mechanical plans including location(s) of smoke/Carbon Mo	
Renewal: Renewal of this certificate is required to continue any structure	ctural work not completed within 2
(two) years. Only one renewal for an additional 1 (one) year is peri	mitted. Another plot plan is not
necessary unless changes to the original applicatio	n are proposed.
Fees: Check for \$ is attached.	Check #:
Cond Contificate of Zening Compliance to	
Send Certificate of Zoning Compliance to:	
The undersigned applicant hereby agrees that:	

- 1) All information provided is accurate to the best of the Applicant's knowledge;
- 2) All proposed work shall be done in accordance with the foregoing statements and shall conform to provisions of the Sanbornton Zoning Ordinance and pertinent Federal, State and local regulations;
- 3) Proposed building corners will be accurately staked out for inspection;
- 4) Appropriate municipal officials may enter upon this property for inspection purposes as required;
- 5) Unauthorized changes shall constitute grounds for revocation of this certificate.

NOTE: A. This Certificate of Zoning Compliance expires 2 (two) years from date of issuance;

B.Issuance of this Certificate reflects the Applicant's current compliance with the
Sanbornton Zoning Ordinance an all other pertinent Town, State and Federal regulations.

NOTE: Applicant separately.	may use this spa	ce to show plot plan.	Submit floor plan and buildir	ng elevation drawins
Applicant's Signat	ture		Date	
Received by Zoni	ng Office		Date	
Action of Board	of Selectmen or	Designee:	Date:	
Grant	Deny	Refer to:		
Conditions:				
Town Permit #:		Signed:	Zoning Enforcement Off	icer or Selectmen