



COMMERCIAL BUILDING PERMIT APPLICATION
Multi-Family Housing, Commercial, Industrial
Town of Ashland • Department of Building Safety
 20 Highland St., PO Box 517, Ashland, New Hampshire 03217
 Tel: 603-968-4432 • Fax: 603-968-3776
bldg@ashland.nh.gov • www.ashlandnh.org

Permit #		CB
Date Closed		

OFFICE USE ONLY

Tax Lot #		Zone	DES Permit #		Type
In Floodplain	In Floodway	SD / SI	FIRM	Eff Date	
Approvals		ZBA	PB	DES	Septic
Floodplain	Driveway	Site Plan	Bldg Plan	Energy	
Date Received			Reason for Denial		
Date Approved					
Date Denied					

SECTION 1 – CONTACT AND PROPERTY INFORMATION

Project Address		Date of application
Property Owner(s)		
Mailing Address		City/State/Zip
Daytime Tel #		Email
Applicant Is: <input type="checkbox"/> Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Other		Name (if Other):
Applicant Mailing Address		
Daytime Tel #		Email

CONTRACTOR INFORMATION		Address	Telephone
Architect			
General Contractor			
	Site Supervisor:		
Electrical			
Plumbing			
Septic			
Mechanical			

SECTION 2 – SCOPE OF WORK / DESCRIPTION OF WORK TO BE PERFORMED

Will the project include work on any of the following? For each CHECKED a permit is required.

<input type="checkbox"/> Construction/Foundation (CB)	<input type="checkbox"/> Driveway (CDw)
<input type="checkbox"/> Plumbing (CP)	<input type="checkbox"/> Electrical (CE)
<input type="checkbox"/> Heating/Cooling/Fuel Storage/Gas Lines (CM)	<input type="checkbox"/> Other Mechanical Work (CM)
<input type="checkbox"/> Demolition of existing structures or part of (CDm)	<input type="checkbox"/> Swimming Pools or Spas (CPI)
Square Feet of Effected Area	Total Estimated Project Cost
	\$

(Continued on the next page)

SECTION 3 – ADDITIONAL ASPECTS OF THE PROJECT: CHECK ALL THAT APPLY

<input type="checkbox"/> Primary Structure	<input type="checkbox"/> Multi-family (3+ units)	<input type="checkbox"/> Mercantile	<input type="checkbox"/> Health Care
<input type="checkbox"/> Accessory Structure	<input type="checkbox"/> Long-term Rental	<input type="checkbox"/> Business / Office	<input type="checkbox"/> Industrial
<input type="checkbox"/> New Structure	<input type="checkbox"/> Short-term Rental	<input type="checkbox"/> Food/Beverage Prep/Service	<input type="checkbox"/> Utilities
<input type="checkbox"/> Repair	<input type="checkbox"/> Lodging	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Educational
<input type="checkbox"/> Addition	<input type="checkbox"/> Elderly/Special Needs	<input type="checkbox"/> Religious	
<input type="checkbox"/> Renovation	<input type="checkbox"/> Other:		

Type of Foundation	<input type="checkbox"/> Concrete	<input type="checkbox"/> Block & Mortar	<input type="checkbox"/> Pier
<input type="checkbox"/> Slab	<input type="checkbox"/> Stem Wall	<input type="checkbox"/> Other:	

Type of Construction	<input type="checkbox"/> Stud Framing	<input type="checkbox"/> Timber Framing	<input type="checkbox"/> Metal Framing
<input type="checkbox"/> Brick/Block	<input type="checkbox"/> Concrete	<input type="checkbox"/> Other:	

HVAC Systems	<input type="checkbox"/> Fuel Oil	<input type="checkbox"/> Gas	<input type="checkbox"/> Electric Heat
<input type="checkbox"/> Wood/Pellet	<input type="checkbox"/> Mini Splits	<input type="checkbox"/> Central AC	<input type="checkbox"/> Other:

Site services	<input type="checkbox"/> Town water	<input type="checkbox"/> On-site well	<input type="checkbox"/> Town sewer	<input type="checkbox"/> Septic
Septic Designer:	State Permit #			

Dimensions/Features of Construction				
Number of Units _____	Total Sq. Ft. _____	No. of Stories _____	Height (highest point) _____	
Number of Parking Spaces:	Residents _____	Employees _____	Patrons _____	
For Accessory Buildings (Garage, Shed, etc.)	Use: _____	Width _____	Length _____	Height _____
	Use: _____	Width _____	Length _____	Height _____
	Use: _____	Width _____	Length _____	Height _____

For Residential/Lodging Occupancies		Please fill in the number of units	
One Bedroom _____	Two Bedroom _____	Three Bedroom _____	Four Bedroom _____
Suites _____	Bath, Full _____	Bath, 3/4 _____	Bath, Half _____

SECTION 4 – SPECIAL SITE CONDITIONS:

If you answer yes to any of these questions, contact the appropriate Office/Agency listed in the **Residential Building Permit Info** document. **Applications are not considered complete unless all questions are answered.**

YES	NO		OFFICE/AGENCY
<input type="checkbox"/>	<input type="checkbox"/>	Will the proposed structure meet the setback requirements? [Ref.: Zoning Ordinance §2.3]	Zoning Board
<input type="checkbox"/>	<input type="checkbox"/>	Will you be connecting to the town water and/or sewer system?	Ashland Water & Sewer
<input type="checkbox"/>	<input type="checkbox"/>	Will you be installing or replacing a private well-water system? <i>If yes, a permit is required from NH DES.</i>	NH Department of Environmental Service
<input type="checkbox"/>	<input type="checkbox"/>	Will you be connecting to the town electrical system?	Ashland Electric Department
<input type="checkbox"/>	<input type="checkbox"/>	Will you be installing or replacing any other type of utility system not described above? (solar/ generator/etc.) <i>Describe:</i>	
<input type="checkbox"/>	<input type="checkbox"/>	Was any decision by the Planning or Zoning Board made in regard to this building project? <i>If yes, please attach a copy of the Board's Notice of Decision</i>	

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SECTION 4 – SPECIAL SITE CONDITIONS (continued):

If you answer yes to any of these questions, contact the appropriate Office/Agency listed in the **Building Permit Info** document. **Applications are not considered complete and may be denied unless all questions are answered.**

YES	NO		OFFICE/AGENCY
<input type="checkbox"/>	<input type="checkbox"/>	INTENT TO CUT (TREES): Will the proposed building project include any logging for resale? [Ref.: RSA 79:10]	Ashland Town Hall
<input type="checkbox"/>	<input type="checkbox"/>	Will the proposed construction activity or landscaping be located within 125 feet of a wetland area? <i>If yes, a permit is required from NH DES.</i>	NH Department of Environmental Service

HAZARDOUS BUILDING MATERIALS

All work on contaminated structures shall follow all procedures and practices prescribed by law.

LEAD: *All projects on structures, or portions of structure, constructed before 1978 must provide documentation that the structure has been remediated of lead prior to the construction or must have a lead-certified and licensed contractor performing the work on those portions of the structure and provide documentation upon completion of the remediation performed.*

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	Does the area of construction contain materials that were painted, stained, or varnished prior to 1978?
Lead Certified Contactor Name _____		
License # _____ Expiration _____ Tel _____		
Address _____		

ASBESTOS: *All projects on structures containing asbestos must provide documentation that the structure has been remediated of asbestos prior to construction or must have an asbestos-certified and licensed contractor performing the work on those portions of the structure and provide documentation upon completion of the remediation performed.*

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	Does the property contain asbestos?
For a list of common asbestos-containing building materials, go to https://www.des.nh.gov/sites/g/files/ehbemt341/files/documents/2020-01/ard-59.pdf		
Asbestos Certified Contactor Name _____		
License # _____ Expiration _____ Tel _____		
Address _____		

HAZARDOUS WASTE: *All projects on structures AND/OR land containing hazardous waste must provide documentation from NH DES and a licensed mitigation professional that the property has been mitigated of hazardous waste prior to a building permit being issued.*

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	Does/Did the property contain hazardous waste (used motor oil, fuel storage tanks, industrial wastes, etc.)?
<i>If yes, include all NH DES permits, documents, and mitigation reports.</i>		
Mitigation Contactor Name _____		
License # _____ Expiration _____ Tel _____		
Address _____		

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SECTION 5 –BUILDING PERMIT FEES

(Include and attach all additional required permits.)

		Qty	Fee	line total	
Multi-Family Residential <i>(Fee is Per Unit)</i>	Application Fee	New*	# of units	X \$150.00	\$
	Application Fee	Alterations/Repairs*	# of units	X \$75.00	\$
	Permit Fee per square foot		sq ft	X \$0.15	\$
Commercial/Industrial <i>(Fee is Per Unit)</i>	Application Fee	New*	# of units	X \$150.00	\$
	Application Fee	Alterations/Repairs*	# of units	X \$75.00	\$
	Permit Fee per square foot		sq ft	X \$0.15	\$
Cell Tower	Per Tower			X \$250.00	
Electrical Permit	from Electrical Permit Form			\$	
Plumbing Permit	from Plumbing Permit Form			\$	
Mechanical Permit	from Mechanical Permit Form			\$	
Driveway Permit	from Driveway Permit Form			\$	
Demolition Permit	from Demolition Permit Form			\$	
Swimming Pools	from Swimming Pool Permit Form			\$	
Sign Permit	from Sign Permit Form			\$	
Additional Fees				\$	
Fee Schedule adopted by Ashland Select Board, May 6, 2019.				TOTAL	\$

* Permit Application Fee is not refundable if the applicant withdraws their application or if it is denied.
No refunds will be issued once work begins.

\$35.00 Re-inspection Fee: per failed inspections or missed appointments.

Work Commencing Before Permit Issued: Any construction started without a required permit will result in the Application and Permit Fees being doubled per the Permit Fee Schedule approved by the Select Board on May 6, 2019.

SECTION 6 – REGULATIONS AND CODE PROVISIONS

ALL WORK SHALL BE PERFORMED IN ACCORDANCE WITH CURRENTLY ADOPTED STATE BUILDING AND FIRE CODES:

BUILDING PLANS & SITE PLAN (IF REQUIRED):

- TWO (2) FULL SIZED SETS OF BUILDING PLANS** are required for all new structures and additions, as well as structural changes to existing structures. Plans will be reviewed and one (1) approved set will be returned with your approved permit.
- CURRENT SITE PLAN** approved by the Ashland Planning Board is required for all new structures OR if there is any change to the exterior footprint of an existing structure. Please review Plan Requirements in the **Building Permit Info** document.

SUSPENSION OR REVOCATION OF PERMITS: “The building official is authorized to suspend or revoke a permit issued under the provisions of this code wherever the permit is issued in error, on the basis of incorrect, inaccurate or incomplete information; in violation of any ordinance, regulation or any of the provisions of this code; or if there have been any false statements or misrepresentations as to the material fact in the application for permit.” [Ref.: 2018 International Building Code: R105.6]

VIOLATIONS: Any stage of construction started without the prerequisite inspection(s) or any work other than to correct a violation after a “Notice to Correct” is issued may result in a “Stop Work Order.” ANY work performed after a “Stop Work Order” is issued is subject to a fine of up to \$275 (for the first offense) or \$550 (for each subsequent offense). Each day a violation continues shall be a separate offence. [Ref.: RSA 676:17]

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SECTION 7 – APPLICANT’S LEGAL STATEMENT AND SIGNATURE

The Applicant understands and agrees to the following conditions:

1. Consent is given to the Building Inspector or Ashland Fire Chief to enter the property during normal working hours to inspect activity covered under the provisions of the State of New Hampshire’s adopted Building and Fire Codes.
2. Only work approved on the permit and construction documents is to be performed.
3. All approved plans and specifications of this application shall be followed during construction. Any change shall only be made after notifying the Building Inspector and receiving approval for. Such changes include, but are not limited to, alterations to dimensions, building techniques, materials used, or the scope of work.
4. Failure to follow the approved application and plans or continuing with the project before passing the required inspections may result in a Notice to Correct, Notice of Violation, Stop Work order, fines, or other legal actions.
5. All work must meet the standards of the State’s current Building and Fire Codes. Any variance from these Codes shall have prior approval by the Building Inspector and/or Fire Chief, as is appropriate.
6. All work must meet the requirements of the Zoning Ordinances of the Town of Ashland and State statutes and regulations. Any variance from Zoning Ordinances shall have prior approval of the Zoning Board of Adjustments.
7. The application fee is not refundable if the applicant withdraws this permit request or if the permit is denied.
8. Omission of any required information may delay permit issuance or constitute reason for denial.
9. The making of a false statement on this form is a criminal offense.
10. Notify the Build Inspector’s office at least 24 hours before work starts.
11. Permits expire if work does not commence within 6 months of issuance **OR** if more than six (6) months pass between inspections.
12. For new construction, a 911 Street Address must be obtained from the Town Office as soon as construction on the lot begins. Contact the Building Inspector for more information or refer to the Town of Ashland 911 Ordinance.

I understand and agree to the conditions listed above. If I am not the property owner or the contractor, I have included a *Letter of Authorization* form granting me the authority to request a permit on behalf of the property owner.

I hereby attest that all statements made on this application and any attached documents are true to the best of my knowledge.

Signature of Applicant

Printed name

Date

**IT IS THE RESPONSIBILITY OF THE APPLICANT TO CONTACT
THE BUILDING INSPECTOR OR THE FIRE CHIEF
TO SCHEDULE REQUIRED INSPECTIONS.**

Department of Building Safety’s regular hours are MONDAY & FRIDAY, 10:00 am to 4:00 pm.

TO SCHEDULE BUILDING INSPECTIONS

CALL 603-968-4432, ext. 562 (office), 617-481-2665 (cell), OR EMAIL BLDG@ASHLAND.NH.GOV

FOR INSPECTIONS RELATED TO THE FIRE CODES

CALL THE ASHLAND FIRE DEPARTMENT AT 603-968-7772.

A list of common inspections is on the next page.

**The following inspections are required in Ashland as a minimum.
Failure to schedule required inspections is a violation
of the Building Codes and State Law.**

1. *Additional inspections may be necessary, depending upon specific circumstances.*
2. You **must** call the Building Inspector in advance at 603-968-4432 ext. 563 or the Fire Chief at 603-968-7772 to schedule these inspections before proceeding to the next building phase.

CONCRETE INSPECTIONS

PIER FOUNDATIONS/DECKS

- **DEPTH VERIFICATION (48")** (After hole is dug and form is placed, but before pouring concrete.)
- **POURED PIERS** (After concrete is poured.
Photographs submitted by email are adequate.)

FULL FOUNDATIONS

- **FOOTINGS & REBAR** (After placement of rebar and forms and before pouring concrete.)
- **POURED FOOTINGS** (After concrete is poured.
Photographs submitted by email are adequate.)
- **FOUNDATION WALLS** (After placement of rebar and forms and before pouring concrete.)
- **FINAL FOUNDATIONS** (Before backfilled.
Photographs submitted by email are adequate.)
- **SLAB INSPECTION** (Once all under-slab utilities are in place and before pouring concrete.)

ROUGH INSPECTIONS

- **FRAMING** (After framing and sheathing are completed and before insulation, roofing or siding are installed.)
- **PLUMBING** (Before installing insulation.)
- **ELECTRICAL** (Before installing insulation.)
- **MECHANICAL** (Before installing insulation.)
- **FUEL TANKS/GAS PIPING/SOLID FUEL STOVES**
(*Contact Ashland Fire Dept.*)
- **INSULATION** (After Framing inspection and before wall board has been installed.)

FINAL INSEPTIONS

- **FUEL TANKS/GAS PIPING/SOLID FUEL STOVES**
(*Contact Ashland Fire Dept.*)
- **LIFE SAFETY** (*Contact Ashland Fire Dept.*)
- **BUILDING INSPECTION** (May include Final Electrical, Plumbing, Mechanical, and Life Safety inspections at the same time.)
- **HEALTH INSPECTION** (If required.)

ISSUANCE OF "CERTIFICATE OF OCCUPANCY"
