



RESIDENTIAL BUILDING PERMIT APPLICATION
One & Two- Family House or Townhouse
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 #		B
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)			
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	Daytime Telephone
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 (B)	<input type="checkbox"/> Driveway (Dw)
<input type="checkbox"/> Plumbing (P)	<input type="checkbox"/> Electrical (E)
<input type="checkbox"/> Heating/Cooling/Fuel Storage/Gas Lines (M or FS)	<input type="checkbox"/> Other Mechanical Work (M)
<input type="checkbox"/> Demolition of existing structures or part of (Dm)	<input type="checkbox"/> Swimming Pools or Spas (PI)
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"/> New Structure	<input type="checkbox"/> Addition	<input type="checkbox"/> Renovation	<input type="checkbox"/> Repair
<input type="checkbox"/> Single family	<input type="checkbox"/> Two family	<input type="checkbox"/> Modular housing	<input type="checkbox"/> Manufactured Home
<input type="checkbox"/> Deck/Porch	<input type="checkbox"/> Garage/Barn/Shed	<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"/> Mini Splits	<input type="checkbox"/> Central AC	<input type="checkbox"/> Wood/Pellet	
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 Dwelling Units _____		Number of Stories _____	
Total Square Feet	Living Area _____ sq.ft.	Non-Living Area _____ sq.ft.	Height (highest point) _____
Bedrooms _____	Number of Baths: Full _____	Bath, ¾ _____	Bath, ½ _____
For Accessory Buildings (Garage, Shed, etc.)	Use: _____	Width _____	Length _____ Height _____
	Use: _____	Width _____	Length _____ Height _____
	Use: _____	Width _____	Length _____ Height _____

Section 3.1 – <u>FOR MANUFACTURED HOME (MOBILE HOME)</u>	
Manufactured Homes <u>MUST</u> be installed by a licensed contractor. <u>Proof of licensure is required with application.</u>	
Installer, Name/Address _____	
License # _____	Expiration _____
Manufacturer _____	
Model _____	Model Year _____ Serial Number _____
Type of foundation/support: _____	
Was there a mobile home located at this address previously? <input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes – Owner's Name _____	Date Removed _____

SECTION 4 – SPECIAL SITE CONDITIONS:		
If you answer yes to any of these questions, contact the appropriate Office/Agency listed in the <i>Residential Building Permit Info</i> document. <i>Applications are not considered complete unless all questions are answered.</i>		
YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	Will the proposed structure meet the setback requirements? <i>[Ref.: Zoning Ordinance §2.3]</i>
<div style="text-align: right; font-weight: bold; font-size: small;">OFFICE/AGENCY</div> <div style="text-align: right;">Zoning Board</div>		
<input type="checkbox"/>	<input type="checkbox"/>	Was any decision by the Planning Board or the Zoning Board of Adjustments 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 **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 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 installing or replacing any other type of utility system not described above? (solar/ generator/etc.) <i>Describe:</i>	

HAZARDOUS BUILDING MATERIALS

NH law allows the owner of up to four dwelling units to perform the remediation of **lead** without a license [NH RSA 130-A:12, I (b)]. The owner of a **single-family owner occupied dwelling** to perform the remediation of **asbestos** [NH RSA 140-E:10, I (c)] without a license. .

However, the Ashland Department of Building Safety **STRONGLY** recommends that you hire a licensed professional. Lead and asbestos are toxic materials that can contaminate your living environment and clothing, then be ingested orally or by breathing their dust. They can cause many types of organ failure (including liver and kidney), cancers, brain defects (especially in children), and even death of yourself, your family, or your pets.

If you do choose to perform the remediation yourself, homeowner shall still follow all of the required remediation procedures for lead or for asbestos as prescribed by law.

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	Does the area of construction contain materials that were painted, stained, or varnished prior to 1978? <i>Unless previously remediated, any building built before 1978 probably has lead wood finishes somewhere and any building built before 1974 definitely does.</i> If yes, safe work practices must be followed. For information: www.epa.gov/lead Lead Certified Contactor Name _____ License # _____ Expiration _____ Tel _____ Address _____

<input type="checkbox"/>	<input type="checkbox"/>	Does the property contain asbestos? <i>Homes built before 1980 are most likely to have used asbestos building materials, including floor tiles, insulation, and drywall. Even some homes built into the mid-1980s may contain asbestos.</i> If yes, an NH DES Asbestos Demolition/Renovation Notification Form may be required. Go to www.des.nh.gov/waste/asbestos/management for more information. Safe work practices must be followed. <i>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</i> Asbestos Certified 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
Residential Single Family	Application Fee	New*		\$100.00	\$
	Application Fee	Alterations/Repairs*		\$50.00	\$
	Permit Fee per square foot	sq ft	X	\$0.15	\$
Residential Two- Family	Application Fee	New*		\$200.00	\$
	Application Fee	Alterations/Repairs*	# of units	X \$50.00	\$
	Permit Fee per square foot	sq ft	X	\$0.15	\$
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.

Temporary Transfer Station Permits are available to contractors. Please review the **Building Permit Application Information** document for more information.

SECTION 6 – REGULATIONS AND CODE PROVISIONS

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

Suspension Or Revocation of Permits: “The code 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 Residential 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.

The 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"
