



TOWN OF GREENLAND, NH
 Bob Cushman, Building Inspector
 575 Portsmouth Avenue – PO Box 100
 Greenland, NH 03840.0100
 Phone: 603.431.3070 x107 // Cell: 603.502.4623 // Fax: 603.430.3761
 Email: bcushman@greenland-nh.com

SHORT FORM

Additions, Renovations, Accessory Buildings, Communications,
 Electrical, Plumbing, Mechanical & Gas Permit

OFFICE ONLY

BMSI ___ FEES ___
 VISION ___ MTHLY ___

Today's Date

PROPERTY OWNER(S)		
NAME		
ADDRESS		MAP LOT
PHONE	EMAIL ADDRESS	
JOB ADDRESS (IF DIFFERENT FROM ABOVE)		MAP LOT
APPLICANT **ATTACH COPY OF ELECTRIC, PLUMBING, MECHANICAL OR GAS LICENSE**		
NAME	LICENSE #	EXP
COMPANY		
ADDRESS		
CITY/STATE/ZIP		
PHONE	EMAIL ADDRESS	
TYPE OF JOB		
New Building [<input type="checkbox"/>] Addition [<input type="checkbox"/>] Alteration/Renovation [<input type="checkbox"/>] Other [<input type="checkbox"/>]		
Nature of Job		
Type of Building, Structure or Use		
Estimated Cost of Job		
Design Details for Construction Provided? Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]		
Notes/Comments		
Possible Required Attachments: plot plan/sketch showing size of lot, size and location of building(s) or structure(s); location of water, sewage and other facilities; floor plan of building(s). Driveways shall not be constructed until a permit is issued.		
IMPORTANT		
Check with the Building Inspector for required inspections. If substantial construction has not begun within one (1) year of the date of issue, the building permit shall be void. For the purpose of this section, "substantial construction" shall be determined by the Building Inspector.		

COMPLETE THE BUILDING PERMIT APPLICATION ON REVERSE; DATE AND SIGN WHERE NOTED

Town of Greenland, NH

REMARKS

SIGNATURES

- 1) All plot plans, floor plans, sewage permits and data required by the Building Inspector **must** accompany this application.
- 2) **All work must conform with the State of NH Building and Fire Codes (International Residential & Building Code [2009 editions]) and current local building and zoning regulations.**
- 3) Design Professional Name (please print) _____

Applicant, Contractor, Design Professional

Date

Application Received By

Date

****OFFICE USE ONLY - BUILDING PERMIT GRANTED ON ABOVE TERMS****

Building Inspector

Date