

Permit #: \_\_\_\_\_

Fee Paid: \$ \_\_\_\_\_

CHK #: \_\_\_\_\_

**APPLICATION for CERTIFICATE 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 Length \_\_\_\_\_ Ft Building Width \_\_\_\_\_ Ft 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.  
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 footing 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: \_\_\_\_\_



NOTE: Applicant may use this space to show plot plan. Submit floor plan and building elevation drawings separately.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Received by Zoning Office

\_\_\_\_\_  
Date

**Action of Board of Selectmen or Designee:** \_\_\_\_\_  
Date: \_\_\_\_\_

Grant \_\_\_\_\_ Deny \_\_\_\_\_ Refer to: \_\_\_\_\_

Conditions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Town Permit #: \_\_\_\_\_

Signed: \_\_\_\_\_  
Zoning Enforcement Officer or Selectmen