

## **Administrative Zoning Permit Application**

## **Code Enforcement Office**

PO Box 660 333 Calef Highway Barrington, NH 03825

When this form is accepted at the Code Enforcement Office, by law it will become a Public Document and all information provided is subject to public disclosure. (See RSA Chapter 91 – A, Access to Governmental Records and Meetings.)

Use	Only Received by:		On Dat	te:	PERMIT NUMBER:	
Date:		CALCOR ASSESSMENT ALLOWS	ocation Map Number:		Location Lot Number:	
	ation dress:		8	<b>.</b>		
Ow	ner's Name:		11 <b>4</b> 0			
Ow	ner's Mailing Address:			12		
Ow	ner's Phone:( )		Owner's Email:			
Al	l Graphics shall be dimensi		SENERAL REQ	• development of the contract		ation.
1	Date of Subdivision or Lot Line Revision creating the lot:					
2	Do wetlands and their buffers exist on the site?					
Α	Project description: (Attach additional sheets if necessary.)					
В	Dimensions (in feet) of proshed or Pier mounted stru		Length:	Width:	Height	
С	Please give the dimensions (in feet) of any existing structures located in the wetland buffer (The sum of the square foot coverage for all structures in the Wetland Buffer is 200 square feet. Projects that will take the combined coverage above 200 square feet require a Special Use Permit. For more information vis the Land Use Office.)  Structure #1: Type:: Length:Width:Height					
	Structure #2: Type:: Length:Width:Height Use separate sheet if there are more structures (including driveways) in the buffer.					
D	Copy of recorded subdivision plan with indication of approximate location of proposed structures. (Available in the Land Use Office)					ires.
E	Please attach existing Constructures on site	nditions P	hotos, up to f	our on a she	et showing all existing	

The Zoning Administrator may request wetlands be delineated by a Certified Wetland Scientist

PERMIT NUMBER: ISSUED with the following conditions								
	DENIED for the following reason(s):							
*								
Signature of Inspector	Title of Inspector	Date						
Inspection Note:								
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