



Town of Antrim

NEW HAMPSHIRE

66 Main Street
Antrim, NH 03440
Office: (603) 588-6785

Building Permit Application Commercial

Building Permit Application – 2015 IBC/IEBC

(For construction, addition, or alteration to buildings under the scope of the IBC and IEBC)

Property Owner

Name: _____

Address: _____
number street town state zip

Phone: _____ Mobile Phone: _____ Email: _____

Permit Applicant

Name: _____

Address: _____
number street town state zip

Phone: _____ Mobile Phone: _____ Email: _____

Property Information

Address: _____ Parcel Number: _____
number street

Builders, Licensed Tradespeople & Professionals

Name

License Number

Phone Number

Registered Designed Professional: _____
(Note: A statement of special inspections may be required per Chapter 17 of the IBC)

Engineer of Record: _____

General Contractor: _____

Electrician: _____

Plumber: _____

Gas Fitter: _____

Fire Alarm System: _____

Sprinkler System: _____

Hood Fire Suppression: _____

Types of Construction, Additions or Alterations

(check all that apply)

- New Addition Alteration/Remodel Renewal of Building Permit Number _____

Commercial/Industrial/Institutional Occupancy Classifications

- | | |
|--|---|
| <input type="checkbox"/> Assembly [A-1, A-2, A-3, A-4, A-5] _____ | <input type="checkbox"/> Institutional [I-1, I-2] _____ |
| <input type="checkbox"/> Business | <input type="checkbox"/> Mercantile |
| <input type="checkbox"/> Education | <input type="checkbox"/> Residential [R-1, R-2, R-3, R-4] _____ |
| <input type="checkbox"/> Factory [F-1, F-2] _____ | <input type="checkbox"/> Storage [S-1, S-2] _____ |
| <input type="checkbox"/> High-Hazard [H-1, H-2, H-3, H-4, H-5] _____ | <input type="checkbox"/> Utility |
| <input type="checkbox"/> Other _____ | |

Description of Proposed Work

Total estimated cost of proposed work: \$ _____

If alteration, are the areas currently occupied or vacant? _____

General description of proposed work:

If change of use, please describe existing and proposed use:

Proposed Setbacks: Front _____ Rear _____ Left Side _____ Right Side _____

- | | | |
|---|------------------------------|-----------------------------|
| Will the proposed building violate any building setback for the zoning district? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building be in the Shoreland Conservation District? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building be in the Wetland Protection District? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building be in a Special Flood Hazard Area? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building be in the Aquifer & Wellhead Protection Overlay District | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building require a new or modified Town driveway entrance? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building require a new or modified State driveway entrance? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building require a new or modified Town water connection? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building require a new private water well? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building have a new geo-thermal heating/cooling system? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building require a new or modified Town sewer connection? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building require a new or modified private septic system design? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building require Special Inspections under IBC Chapter 17? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Will the proposed building require a new or modified State E911 address? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

International Existing Building Code (IEEBC) Compliance Method

(For additions and alterations to existing buildings)

Please choose ONLY one of the four compliance methods:

- 2009 IBC compliance (you are now done with this section)
- Prescriptive
- Work Area
- Performance

Please check all boxes that apply:

Prescriptive (Chapter 3)

- Repairs
- Alteration
- Addition
- Change of Occupancy

Work Area (Chapters 4-12)

- Repairs: Chapter 5
- Alteration (check only one box)
 - Level 1: (Chapter 6)
 - Level 2: (Chapters 7,6)
 - Level 3: (Chapters 8,7,6)
- Change of Occupancy: (Chapter 9)
- Additions: (Chapter 10)
- Historic buildings: (Chapter 11)
- Relocated or moved buildings: (Chapter 12)

Performance (Chapter 13)

- Repairs
- Alterations
- Addition
- Change of Occupancy

Applicant Affidavit

I hereby certify that the information provided is true and correct to the best of my knowledge. No changes to the information provided shall be made without approval of the Code Enforcement Officer. I further grant the Code Enforcement Officer the right to enter the premises or buildings at reasonable times during the plan review process and for inspections of the project during the construction phase. Construction activities will not start until the Building Permit has been issued.

I acknowledge that all work will conform to the Town of Antrim Zoning Ordinance and the State of New Hampshire Building Code, and that the structure will not be occupied or utilized until a Certificate of Occupancy has been issued after all work has been completed and inspected.

Please indicate that you are the owner or authorized agent:

- I am the owner of the property
- I am the authorized agent

Signature of Applicant

Print Name

Date