

# Application for Permit to Demolish

A Plot Plan showing location of structure to be demolished must accompany Demolition Permit Application. Please indicate streets, surface water, and other buildings. Permit good for one year from date of issue.

Temple, NH, Date \_\_\_\_\_

Owner \_\_\_\_\_

Address \_\_\_\_\_

Tel. # \_\_\_\_\_

Type of Use: Dwelling \_\_\_\_\_ Commercial \_\_\_\_\_ Industrial \_\_\_\_\_ Other \_\_\_\_\_

Zoning District Village, rural, mountain \_\_\_\_\_ Tax Map \_\_\_\_\_ Lot # \_\_\_\_\_

Location of Building (address) \_\_\_\_\_

Reason for demolition: \_\_\_\_\_

Type of Structure (wood, steel, mobile) \_\_\_\_\_

Foot Print Size of Building \_\_\_\_\_ Frontage Ft. \_\_\_\_\_ Size of Lot \_\_\_\_\_

Distance from Boundary Line: Left \_\_\_\_\_ Right \_\_\_\_\_ Front \_\_\_\_\_ Back \_\_\_\_\_

Description of Proposed Work \_\_\_\_\_

Fee: There is no fee for a demolition permit. The applicant must contact the State of NH Department of Environmental Services-Air Resources Division regarding the State of NH requirements for testing before demolition, if required.

-Signatures-

Road agent signature. Kent Perry \_\_\_\_\_ 878-2744

Health officer. Peter Caswell \_\_\_\_\_ 878-1672

Plan meets NH State Fire Code. Building inspector: William S. Wildes \_\_\_\_\_ 878-4320

The undersigned agrees that the proposed work shall be done in accordance with the forgoing statement and with the plans and specifications submitted and that work connected therewith shall conform to the State of New Hampshire Fire Code and all State and Town of Temple regulations, and that the owner will notify the Building Inspector, Health officer and Road Agent when ready for inspection.

Applicant signature \_\_\_\_\_ Date \_\_\_\_\_

Selectmen's Meeting:      Approved      Not Approved      Hearing Required  
Hearing:                      Approved      Not Approved

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**PERMIT #** \_\_\_\_\_

THIS CERTIFIES THAT \_\_\_\_\_

Owner, may build (description of project) \_\_\_\_\_

\_\_\_\_\_

in accordance with the foregoing application and approved plans.

Select Board Signatures:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

