

**TOWN OF GILSUM  
APPLICATION FOR BUILDING PERMIT**

Building Permit No. \_\_\_\_\_

PO Box 67,  
Gilsum, NH 03448  
(603) 357-0320

Building Permit Fee \$ \_\_\_\_\_ Estimated Cost \$ \_\_\_\_\_

Property Information - - Where improvements are proposed

Map/Lot # \_\_\_\_\_ Street # \_\_\_\_\_ Street Name \_\_\_\_\_ Zone \_\_\_\_\_

Owner Information – Who is the legal owner of the property where the improvements are proposed?

Name: \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_ E-mail \_\_\_\_\_

Name of Contact Person \_\_\_\_\_ Phone # \_\_\_\_\_

Building Information - - Size of Building \_\_\_\_\_ X \_\_\_\_\_ or Square feet \_\_\_\_\_

Permit Type (Check): Residential \_\_\_\_\_ Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

Structure Type: House \_\_\_\_\_ Garage \_\_\_\_\_ Barn \_\_\_\_\_ Other types \_\_\_\_\_

Work Type: New \_\_\_\_\_ Addition \_\_\_\_\_ Renovation \_\_\_\_\_

Brief Description of building and/or usage

Licensed Contractors and Architect or Engineers involved in project

**Builder, Architect, or Engineer** \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone # \_\_\_\_\_

**Electrician's Name** \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_

License # \_\_\_\_\_ Expiration Date \_\_\_\_\_ License holder signature \_\_\_\_\_

**Plumber's Name** \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_

License # \_\_\_\_\_ Expiration Date \_\_\_\_\_ License holder signature \_\_\_\_\_

I hereby certify that as the applicant for permit, I am the owner of this property [ ], or the owners authorized agent [ ]. I hereby declare that the statements and information contained in this application and submitted in conjunction with said application are true and accurate to the best of my knowledge. I understand that I am responsible to ensure that all construction or other work will be completed in accord with all Federal, State and Local laws, building codes and zoning ordinances, including, but not limited to the State Building Code. I understand that I am responsible to ensure that all inspections will be completed as required by the Town of Gilsum.

Owner's signature \_\_\_\_\_ Date \_\_\_\_\_  
Or Authorized Agent