

TOWN of MASON, New Hampshire

Date: _____

Owner's Name _____ Phone # _____

Permanent Address _____

Address of Proposed Building: No. _____

Contractor's Name _____ Phone # _____

Have you seen a copy of the Mason Building Code and/or Planning Ordinance? YES__ NO__

If NO, I received a copy on: _____

PER NFPA 211: (1) FUEL BURNING APPLIANCE PER CHIMNEY FLUE

Plot Plan:

Is this property located in the floodplain?

Yes__ No__

Town District: HP__ VR__ GRAF__

Tax Map No. _____

Lot Size: _____ Acres)

Frontage: _____ (Feet)

Include: Well Location
Septic Systems
All Set Backs

Plot Plan area with a large empty box for drawing and the label 'Road:' at the bottom.

* STATE APPROVAL FOR SEPTIC NO.: _____

BUILDING PLAN

Plan Submitted: YES__ NO__ Submitted on: _____

Type of Structure: Residential__ Other__ (If Other, fully describe on the back of this form.)

Building Size: _____ Style: _____ No. Floors: _____

Basement: _____ Rafters: _____ (All framing shall be standard 16" centers)

No. Rooms: Kit__ Bath (full)__ (half)__ Dining__ Living__ Sleeping__ Other__ Total__

Foundation: _____ Sills: _____ Girders: _____ Studs: 2"x 6" O.S. _____ 2"x 4" I.S. _____

Insulation Sidewalls: _____ Roof: _____

Siding: _____

Roofing: _____

Floors: Cellar__ Kit__ Bath__ Remainder__

Except: _____

Fireplaces: _____ Chimneys: _____ w/No. Flues Ea: _____

Wall Construction: _____

Type of Heating Plant: _____

Type of Water Pump: _____

Estimated Cost: \$ _____

SIGNATURE OF APPLICANT: _____

PERMIT IS NON-TRANSFERABLE : Applicant's Initials: _____

PERMIT GRANTED _____ BY _____ NOT GRANTED _____ BY: _____

Reason if Not Granted: _____

The Selectmen reserve the right to review all Applications.

Inspections: No. 1: _____ *No. 2: _____ No. 3: _____ No. 4: _____