



Permit Renewal
(No Change of Contractors)

Town of Nottingham, New Hampshire
Building Department
P.O. Box 114/ 139 Stage Road
Nottingham, NH 03290
Office 603-679-9597
Fax 603-679-1013
dzylvia@nottingham-nh.gov

Issue Date: _____
Permit #: _____
(This area for office use only)

Map# _____
Lot # _____
Sub lot # _____
Existing
Permit # _____

LOCATION OF BUILDING	AT (LOCATION)		ZONING DISTRICT	
	(NO.) (STREET)			
	BETWEEN	AND		
	(CROSS STREET)		(CROSS STREET)	
BUILDING Contractor _____ Address _____ Master License # _____ Telephone# _____ Type: Residential _____ Non-Residential _____		ELECTRICAL Contractor _____ Address _____ Master License # _____ Telephone# _____ Type: Residential _____ Non-Residential _____		
PLUMBING Contractor _____ Address _____ Master License # _____ Telephone# _____ Type: Residential _____ Non-Residential _____		MECHANICAL Contractor _____ Address _____ Master License # _____ Telephone# _____ Type: Residential _____ Non-Residential _____		
Name		Mailing Address- #, Street, City, State		Zip Code
Owner or Lessee				Tel. No.
Contractor				
<i>The owner of this building and the undersigned agree to conform to all applicable laws of this jurisdiction.</i>				
Signature of Applicant		Address		Application Date

***** (DO NOT WRITE IN THIS SPACE- OFFICE USE ONLY) *****

PAID BY: _____	DATE: _____
REC'D BY: _____	CASH <input type="checkbox"/> CHECK # _____
APPLICANT SIGNED: <input type="checkbox"/>	AMOUNT: _____

Approved By: _____ Date: _____

Applicant

Code Enforcement

Assessor