



**SEPTIC PERMIT APPLICATION**

Town of Nottingham, New Hampshire  
Building Department  
P.O. Box 114/ 139 Stage Road  
Nottingham, NH 03290  
Office 603-679-9597 X1  
Fax 603-679-1013  
Plan.zone@nottingham-nh.gov

Issue Date: \_\_\_\_\_  
Permit #: \_\_\_\_\_  
 Fee Paid : \$75.00  
(This area for office use only)

**Project Location:** Map \_\_\_\_\_ Lot \_\_\_\_\_ Sub Lot \_\_\_\_\_ Lot Size \_\_\_\_\_  
Address: \_\_\_\_\_  
**Owner Information:**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
**Installer Information:**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
**Designer Information:**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**TYPE OF USE**

Residential:  One Family  Two or more Families \_\_\_\_\_ No. of Units  
 Hotel/Motel \_\_\_\_\_ No. of Units  Other, Specify \_\_\_\_\_

No. of Bedrooms \_\_\_\_\_ No. of Bathrooms: Full \_\_\_\_\_ Partial \_\_\_\_\_  
No. of Proposed Bedrooms \_\_\_\_\_

Nonresidential:  Amusement  Church  Industrial  Parking Garage  
 Hospital  Service Station/ Repair Garage  Office, Bank, Professional  
 School, Library, Etc.  Other, Please Specify \_\_\_\_\_

Detailed proposed use of the building \_\_\_\_\_  
Detail existing use of building \_\_\_\_\_  
Square footage \_\_\_\_\_ Occupancy Load \_\_\_\_\_

**TYPE OF IMPROVEMENT**  New system  Replacement in-kind  
 Failed System  Other, Specify \_\_\_\_\_

**Date** \_\_\_\_\_ -Test pits have been dug & witnessed by The Nottingham Code Enforcement Official  
(if not done you must schedule an inspection prior to permit approval.)

**Bed Bottom inspection required by Town of Nottingham- Allow 48 hrs. Notice**

## CERTIFICATION

- I hereby certify that I have read and examined this application and know the same to be true and correct. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.
- No substantive changes(s) in the project scope and accompanying plans will be made without approval of the Building Inspector.
- I, owner/ applicant, hereby agree to comply with all statutes, ordinances, and/ or other Town rules as they pertain to the exercising of this permit.
- I, owner/ applicant hereby give permission for the Building Inspector and/or other Town employees to enter onto the property at reasonable times for purposes of assuring compliance with any permits and approvals pertaining to this building permit.
- I further acknowledge that the proposed structure or improvement(s) shall not be occupied or otherwise utilized without the issuance of a **CERTIFICATE OF OCCUPANCY**. A Certificate of Occupancy is required for all inspections.

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Signature of Contractor or Authorized Agent

Date

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Signature of Owner

Date

### PLEASE NOTE:

- Neither the review of any applications or plans by officials of the Town of Nottingham, nor any subsequent inspection of the premises, should be relied upon as an assurance of conformity to legal requirements, The applicant shall remain fully responsible for complying with all applicable United States, New Hampshire or Nottingham laws, ordinances, regulations or conditions.
- A Site or Plot Plan or sketch showing the actual dimensions of the building site and the property setbacks is required.
- This permit becomes null and void if work or construction authorized has not commenced within 180 days or if construction or work is suspended or abandoned for a period of 180 days at any time after work has commenced.
- This permit is not assignable or transferable.