

**APPLICATION FOR DEMOLITION PERMIT**

City of Franklin, New Hampshire

Please print Legibly and with Ink

Permit # \_\_\_\_\_

Tax Map/Lot # \_\_\_\_\_

Street Address of Proposed Project: \_\_\_\_\_

Owner's Name:			
Address:			
Telephone #:	(Home #)	(Work #)	(Cell #)

Person completing Application: \_\_\_\_\_

**If you are not the owner, a letter of authorization must be submitted with this application.**

**TYPE OF DEMOLITION:**

- Entire Home     
  Entire Building     
  Addition     
  Interior Demolition  
 Outbuilding     
  Other \_\_\_\_\_

**PROJECT COST:** \$ \_\_\_\_\_ . \_\_\_\_ (You MUST include estimated cost of labor & materials even if these items are free)

**FACILITIES:**

- City Water   
  Well     
  City Sewer   
  Septic     
 Located in a flood zone? Yes/No

**Briefly describe the proposed project and previous use of structure:** \_\_\_\_\_

Please provide the name of the professionals expected to work on this proposal (if applicable):

Contractor's Name:	Telephone #
Electrician's Name:	License #:
Plumber's Name:	License #:

**YOU MUST ATTACH A SKETCH OF THE PROPERTY SHOWING WHAT IS BEING REMOVED. IF YOU ARE BUILDING IN PLACE OF THE ITEM BEING REMOVED, YOU MUST ALSO ATTACH A BUILDING PERMIT.**

**THERE IS A FEE OF \$40.00 FOR EVERY DEMOLITION PERMIT APPLIED FOR. THERE IS ALSO A \$40.00 FINAL INSPECTION FEE FOR EACH PERMIT.**

**I CERTIFY THAT THE ABOVE INFORMATION IS ACCURATE. I UNDERSTAND THAT ANY MISTATEMENT ON THIS APPLICATION MAY BE GROUNDS FOR REVOCATION OR ANY PERMIT ISSUED.**

\_\_\_\_\_  
 SIGNATURE OF PERSON COMPLETING THE APPLICATION      DATE

**DO NOT WRITE IN THIS SPACE- FOR OFFICE USE ONLY!**

Date Submitted: \_\_\_\_\_ Zone: \_\_\_\_\_ Amount Collected: \_\_\_\_\_  cash  ck #

Fire Department Concerns: \_\_\_\_\_  Approved  Denied

\_\_\_\_\_  
 Signature      Date

Planning and Zoning Administrator Concerns: \_\_\_\_\_  Approved  Denied

\_\_\_\_\_  
 Signature      Date