



DEMOLITION PERMIT

Town of Campton, NH
12 Gearty Way, Campton NH 03223
603-726-3223
www.camptonnh.org

PROPERTY OWNER'S NAME: _____

MAILING ADDRESS: _____

PHYSICAL ADDRESS: _____

TELEPHONE: _____ EMAIL: _____

LOCATION OF PROPERTY: _____

MAP & LOT #: _____ ACREAGE: _____

TYPE OF BUILDING: _____

State size, single family home, mobile home, etc.

DATE CONSTRUCTION TO START: _____ ESTIMATED COMPLETION DATE: _____

ESTIMATED COST: _____

CONTRACTOR NAME & #: _____

IS THE PROPERTY LOCATED ON A CLASS VI ROAD? YES NO

We (I) herby certify that all information provided by us (me) is accurate, and that demolition would be conducted in compliance with the State Regulations and Town Zoning Ordinance and acknowledge that we are in receipt of the Ordinance (to download Zoning Ordinance, go to www.camptonnh.org).

DATE: _____

APPLICANT (Property Owner's Signatures)

COMPLIANCE OFFICER'S COMMENTS:

PERMIT APPROVED: _____

PERMIT DENIED: _____

REASON FOR DENIAL: _____

COMPLIANCE OFFICER'S SIGNATURE: _____

DATE: _____

PERMIT EXPIRES: _____

COMPLIANCE FOLLOW UP: _____

CAMPTON BOARD OF SELECTMEN

Date: _____

