



**Town of New Hampton**  
**Office of the Selectmen**  
 6 Pinnacle Hill Road  
 New Hampton, New Hampshire 03256  
**OCCUPANCY PERMIT**

(603) 744-3559  
 FAX (603) 744-5106

**Property Owner: Please complete the box below and submit with the original green permit.**

Owner's Name: _____	Tax Map _____ Lot# _____
Mailing Address: _____	Bdg Permit # <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span>
<b>Fee Paid \$125.00</b>	Physical Address/Location _____
<input type="checkbox"/> Cash <input type="checkbox"/> Check # _____	Structure Category: (Check applicable category)
<input type="checkbox"/>	<input type="checkbox"/>
New structure	Expansion/Change of Use
	<input type="checkbox"/>
	Substantial Improvements
<p><i>Check appropriate boxes below and submit documentation attesting to the installation of each of the following systems:</i></p> <p>State Approved for Operation _____ Other permitted system N/A</p> <p>Disposal System Approval Date _____</p> <p>Water Supply – Public <input type="checkbox"/> Private <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Power Source for electrical system – Electric <input type="checkbox"/> Solar <input type="checkbox"/> Wind <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Driveway Installed in accordance with permit: YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>Property Owner is responsible for contacting the Fire Department to obtain an inspection for the following, as applicable:</p> <p><input type="checkbox"/> Fossil-fueled, propane or interior wood fired heating system</p> <p><input type="checkbox"/> Installation of hard-wired smoke detectors</p> <p><input type="checkbox"/> Installation of hard-wired carbon monoxide detectors</p>	
	<i>Fire Chief or Authorized Signature</i>
<p><b>I have provided complete, true and accurate documentation to obtain an Occupancy Permit. I understand it is my responsibility to insure that my construction was done in accordance with the State Building Codes.</b></p>	
_____	_____
<i>Date</i>	<i>Applicant/Owner Signature</i>

Contingencies for approval, when applicable: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
*Date of Certificate*

\_\_\_\_\_  
*Approved by (Building Official/Selectman)*