

APPLICATION FOR ZONING PERMIT

**TOWN OF MONROE**

NUMBER \_\_\_\_\_

P.O. Box 63  
Monroe, NH 03771  
603-638-2644

The undersigned hereby requests a zoning permit for the following use, to be issued on the basis of the representations contained herein. Permit voided in the event of misrepresentation.

LOCATION OF PROPERTY \_\_\_\_\_

NAME OF LANDOWNER \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE NO. \_\_\_\_\_

Name of applicant (owner, lessee or agent) \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE NO. \_\_\_\_\_

Nature of Work: New Construction \_\_\_\_\_ Addition \_\_\_\_\_

Structural Alteration \_\_\_\_\_ Other \_\_\_\_\_

Existing Use and Occupancy \_\_\_\_\_

Proposed Use and Occupancy \_\_\_\_\_

Lot Size \_\_\_\_\_ Frontage on Public Road \_\_\_\_\_ Feet  
(Square feet or acres)

Building Length \_\_\_\_\_ Width \_\_\_\_\_ No. of Stories \_\_\_\_\_ Height \_\_\_\_\_

Setback From: Road right of way \_\_\_\_\_ Rear \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_

Type of Water System \_\_\_\_\_ Type of Sewerage System \_\_\_\_\_

A general plot plan showing the location of the property and building or work areas must be attached to each copy of this application.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

**FOR USE BY BUILDING INSPECTOR ONLY**

Application No. \_\_\_\_\_ Received \_\_\_\_\_ Fee Paid \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Referred to Board of Adjustment \_\_\_\_\_ Date \_\_\_\_\_

Reason for Denial \_\_\_\_\_

Date of Inspection \_\_\_\_\_

Please return both copies to the  
Selectmen's Office for signatures.  
Please either make a brief drawing of your  
floor plan or send a copy of your floor  
plan.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
BOARD OF SELECTMEN OF MONROE