

\*\*\*\*\* OCCUPANCY PERMIT CHECKLIST \*\*\*\*\*

LOCATION: \_\_\_\_\_ MAP: \_\_\_\_\_ LOT: \_\_\_\_\_

Any permit to occupy a residential or commercial building requires the following:

- 1. Final Building Inspection ☐
- 2. Final Electrical Inspection ☐
- 3. Final Plumbing Inspection ☐
- 4. Final Driveway Inspection (Highway Safety Committee 635-7811) ☐

The following information must accompany this form or be on file at the Planning Dept.:

- ☐ 11x17 **Certified Plot Plan** showing location of building & monuments set (granite bounds, iron pipes)
- ☐ Copy of 22x34 **Septic As-Built Plan & Operation Approval** from New Hampshire Water Supply and Pollution Control Commission must accompany this form
- ☐ Photo confirmation or letter stating **WCD Signs** have been posted, if applicable.
- ☐ **Oil/Gas Burning Permit** (from the Fire Department 635-2703)
- ☐ Copy of **Well Test** to be done by a **NH Certified Well Testing Lab** in accordance with Section 5 of the Board of Health Water Supply Regulations – Well Ordinance. **If any primary elements fail, a point of entry mitigation system will need to be installed, and a letter from the installer is required (invoices are not acceptable). Post treatment test showing passing results must also be submitted.**
- ☐ A completed **Well Data Report** submitted by the well driller or his agent.
- ☐ A completed **Blower Door Test**. Must demonstrate an air exchange rate of seven Air Changes per Hour (ACH) or less @ 50 Pa.
- ☐ **A COPY OF THE BUILDING PERMIT INCLUDING ALL SIGNATURES/DATES OF INSPECTIONS**
- ☐ Dwelling properly addressed with 4” number on both sides of mailbox and on the house, which is readable from the street as per RSA 231:133-a
- ☐ Automated Sprinkler System provided YES -or- NO ☐ Automated Sprinkler System Required YES -or- NO

All necessary approvals **must be submitted** to the Planning Department at least **3 business days in advance** of requesting an occupancy permit. **NO EXCEPTIONS!!!!**

*I hereby certify that all the above approvals have been submitted to the Planning Department in accordance with above.*

Printed name of Builder/Owner: \_\_\_\_\_ Phone # \_\_\_\_\_

Signature of Builder/Owner: \_\_\_\_\_ Date: \_\_\_\_\_

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**Please do not submit this with your application.**  
**Keep this form to complete & submit at time of Certificate of Occupancy request.**