

**TOWN OF New Castle, New Hampshire**  
49 Main Street, PO Box 367, New Castle, NH 03854-0367



TELEPHONE (603) 431-6710 X 15 FAX (603) 433-6198

[Buildinginspector@newcastlenh.org](mailto:Buildinginspector@newcastlenh.org)

**OFFICES OF The BUILDING INSPECTOR  
&  
CODE ENFORCEMENT**

**INSTRUCTIONS FOR APPLYING FOR A BUILDING PERMIT**

**No Building Permit for any building or structure on any lot shall be issued except to the owner of record or their authorized agent. The proposed construction or alteration of a building or structure shall comply in all respects with the provisions of the Town of New Castles Zoning Ordinance, or with a decision rendered by the Zoning Board of Appeals or the Planning Board.**

**Any application for such a permit shall be accompanied by some or all of the following required documents as required.**

1. \$25.00 Application Fee submitted with this application.
2. A copy of the current signed and recorded deed for the property. If the property is in a Trust or Corporation, a copy of the recorded deed and authorization page(s) for Trustees and/or Officers is required.
3. A letter of authorization if other than the property owner applying for permit.
4. 2 sets of plans 11 x 17 for New House/Garage/Addition or 8 1/2 x 11 for sheds/decks porches including:
  - Elevations – as required (North, South, East, and West)
  - Floor Plans – Including basement
  - Building Section – show all components and sizes for:
  - Footing and foundation
  - Floor and walls
  - Rafters
  - Engineering for Roof or Floor Trusses
  - All outside Accessories – sheds, decks, porches, stoops, stairs with component sizes shown
  - Joist and rafter sizes
5. A completed 3-page Building Permit Application with site plan (see attached).
6. New Hampshire Residential Energy Code Application Form
7. “Approval for Construction” by DES for a Waste Water Disposal System if applicable.
8. Driveway Permit Application if applicable.
9. NH-DES Shoreland Permit Approval if applicable.
10. Road Release Form for Private Roads.

**All new structures and driveways must be staked out in the location where they are to be constructed.**

All Permit Applications will be reviewed and issued within 30 days of submittal of a complete packet of information. All Permits are subject to appeal or revocation 30 days after issuance. Commencement of work within the 30-day period shall be at the risk of the permit holder/property owner.



## Town of New Castle Building Permit Application

Issue Date: \_\_\_\_\_  
 Permit#: \_\_\_\_\_  
 Map: \_\_\_\_\_  
 Lot: \_\_\_\_\_  
 Zone: \_\_\_\_\_

Email Address \_\_\_\_\_

Physical Address \_\_\_\_\_

### Owner Information

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone # \_\_\_\_\_  
 Cell # \_\_\_\_\_

### Contractor Information

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone # \_\_\_\_\_  
 Cell # \_\_\_\_\_

### Building Information

	Existing	New	Total	
Number of Bedrooms	_____	_____	_____	
Number of Bathrooms	_____	_____	_____	
Living Space-Square Ft	_____	_____	_____	
Non-Living Space Sq Ft	_____	_____	_____	
Garage – Square Ft	_____	_____	_____	
Deck/Porch Square Ft	_____	_____	_____	
Shed – Square Footage	_____	_____	_____	Modular
Construction	Yes _____	No _____		

### Description of Proposed Construction:

### Other Permits Required:

- |  |                                    |
|--|------------------------------------|
| ( ) Planning Board Approval Date: _____                  | ( ) Electrical                     |
| ( ) Zoning Board Approval Date: _____                    | ( ) Plumbing                       |
| ( ) Conservation Board Approval Date: _____              | ( ) Mechanical / Gas               |
| ( ) Contractor Yard Approval Date: _____                 | ( ) Energy Compliance Form         |
| ( ) Septic Permit #: _____                               | ( ) Historic District / Commission |
| ( ) Driveway on Town, State, OR Private Road Association |                                    |
| ( ) Shoreland Permit # _____                             | (                                  |
| ) AFTER-THE FACT   |                                    |

**Occupancy/Use Information:**

- |   |   |
|---|---|
| <input type="checkbox"/> Residential                | <input type="checkbox"/> Business                           |
| <input type="checkbox"/> Residential /Seasonal Only | <input type="checkbox"/> Mixed Use                          |
| <input type="checkbox"/> Accessory/Storage          | <input type="checkbox"/> Institutional/Assembly             |
| <input type="checkbox"/> Commercial/Industrial      | <input type="checkbox"/> Current Use? _____ Acreage Removed |
| <input type="checkbox"/> Other: _____               | <input type="checkbox"/> Best Management Practices Required |

For Office Use Only

Please initial and date after review

\_\_\_\_\_  
Building Inspector

\_\_\_\_\_  
Date

\_\_\_\_\_  
Code Enforcement Officer

\_\_\_\_\_  
Date

**SITE PLAN**

**FOR OUR MAPPING PURPOSES A SKETCH OF THE SITE PLAN MUST BE  
ON THIS PAGE AND INCLUDE THE FOLLOWING:**

1. Identify the dimension of the lot.
2. Proposed and existing structures on the property.
3. Location of the Driveway from Property Line to Center of Driveway.
4. All distances from: Property Lines, Edge of Right of Ways, Water Bodies and Wetlands.

PROPERTY ADDRESS \_\_\_\_\_

Estimated Cost of Construction \$ \_\_\_\_\_

**(Permit fee is based on \$7.00 per \$1,000.00 of Construction Cost \*\*Round up to nearest thousand\*\*  
plus a \$25.00 application fee, Minimum \$50.00)**

I hereby certify that all the information on this application is correct:

Signature of Applicant \_\_\_\_\_

( ) Granted Fee \$ \_\_\_\_\_

( ) Denied Reason for Denial: \_\_\_\_\_

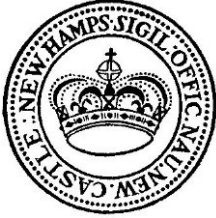
\_\_\_\_\_  
Building Inspector

\_\_\_\_\_  
Date

\_\_\_\_\_  
Code Enforcement Officer

\_\_\_\_\_  
Date

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**NOTICE**

1. Construction must start within 180 days/six (6) months after issuance of Building Permit.
2. Building Permit must be displayed visibly from roadway.
3. When all rough carpentry (electrical and plumbing) is complete, call the building inspector's office for a rough inspection.
4. To obtain an Occupancy Certificate, contact the building inspector. All work must be completed.
5. If a return inspection trip is necessary for failing an inspection, an additional fee of \$25.00 will be charged.
6. You are responsible for the Building Permit. It must be returned to the Code Enforcement Officer before receipt of the Occupancy Certificate.
7. Wood shingles are not permitted unless they meet Class B fire rating or higher, as rated by the National Fire Protection Association Standards. Contractor or owner must obtain approval from the Building Inspector prior to installation.
8. Is there a Fire Department Emergency Access Box on site? Yes ☐ No ☐

I \_\_\_\_\_ hereby attest that all of the information/measurements stated on the building permit application /site plan are accurate and in compliance with the Town of New Castle Zoning Ordinance.

Furthermore, I understand that any variance from these measurements that encroaches upon the minimum setbacks requirements as set forth in the New Castle Zoning Ordinance, will be corrected through the direction of the Town of New Castle Code Enforcement Officer. In addition, I also agree to pay, in full, all costs incurred by the Town of New Castle to bring into conformance any violation that this structure/use may create.

All permits are subject to appeal or revocation for 30 days after issuance. Commencement of work within the 30-day period shall be at the risk of the permit holder/property owner.

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Owner	Date
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Contractor	Date
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Building Inspector	Date
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Code Enforcement Officer	Date
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