

*For Office Use Only*

*(Revised 05-04)*

Permit # \_\_\_\_\_

Fee \$ \_\_\_\_\_

Map# \_\_\_\_\_ /Lot# \_\_\_\_\_

**TOWN OF FRANCONIA PERMIT APPLICATION  
SEWAGE SYSTEM – COMMERCIAL and MULTI-USER**

**OWNER:** \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**APPLICANT:** \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**DESIGNER:** \_\_\_\_\_ Lic. #: \_\_\_\_\_

Address: \_\_\_\_\_

**LOCATION OF PROPERTY:** Map # \_\_\_\_\_ Lot # \_\_\_\_\_ Street \_\_\_\_\_

Size of Lot \_\_\_\_\_ IS LOT IN CURRENT USE? \_\_\_\_\_ Yes \_\_\_\_\_ No

**URGENCY:** New \_\_\_\_\_ Replacement \_\_\_\_\_ Failed System \_\_\_\_\_ Emergency \_\_\_\_\_ Upgrade \_\_\_\_\_

**BEDROOMS:** Number of bedrooms this system is designed to accommodate? \_\_\_\_\_

**NON-DWELLING:** Describe structure(s) and data regarding what the system is designed for (i.e., laundry, number of washers, sinks, etc.; if restaurant, number of seats, restrooms, etc.; if offices, number of units, employees, etc.) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DWELLING:** If dwelling or mixed use (inn, motel, etc.), describe structure and list number of units, bedrooms, or other pertinent data relative to usage which the system is designed to accommodate.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WATER SUPPLY:** Town water \_\_\_\_\_ Private Well \_\_\_\_\_ Other \_\_\_\_\_

**FLOOD HAZARD AREA?** \_\_\_\_\_ Yes \_\_\_\_\_ No  
Are there any streams, drainage ditches, or wetland areas impacted by this system? \_\_\_\_\_

**PRIOR NHWSPCC APPROVAL:** # \_\_\_\_\_ Date: \_\_\_\_\_

**PLANS:** Please attach a map with scale, north arrow and names of bordering roads, or the lot on which the system is to be placed. Show ALL lot lines with dimensions, all water sources including water lines, all proposed or existing wells, streams, ponds, proposed or existing culverts, runoff areas, etc. Show all proposed and existing structures with dimensions, and distances from proposed system to all lot lines. If the system will be within 75' of any lot line, show proposed or existing sewage systems, water courses, and structures on adjacent lot.

**ZONING ORDINANCE:** It is required that all sewage systems be located at least 50' from the street center line and 20' from any lot line.

**SIGNATURE OF APPLICANT** \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICATION FEE RECEIVED \$** \_\_\_\_\_ Date: \_\_\_\_\_

**NOTES:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Reviewed by:** \_\_\_\_\_ Date: \_\_\_\_\_

**Please include a large stamped, addressed envelope for mailing your application to Concord:**

**State of New Hampshire  
Department of Environmental Services  
Subsurface Systems Bureau  
P.O. Box 95  
6 Hazen Drive  
Concord, NH 03302-0095**