

# CITY OF PORTSMOUTH NEW HAMPSHIRE

# SITE REVIEW APPLICATION

Building Permit Application Number \_\_\_\_\_

Case Number \_\_\_\_\_

Fee \_\_\_\_\_

Map \_\_\_\_\_ Lot \_\_\_\_\_ Zone \_\_\_\_\_ Wetlands: Inland \_\_\_\_\_ Coastal \_\_\_\_\_ Lot Area \_\_\_\_\_

**Date of Approvals (Indicate if Pending)**

Conservation Commission \_\_\_\_\_ Conditional Use \_\_\_\_\_ Board of Adjustment \_\_\_\_\_

Historic District Commission \_\_\_\_\_ Subdivision \_\_\_\_\_ Other \_\_\_\_\_

Street Address \_\_\_\_\_

Description of Project including all use(s) \_\_\_\_\_

Building(s) Footprint \_\_\_\_\_ Gross Floor Area \_\_\_\_\_ #of Stories \_\_\_\_\_

# of Dwelling Units \_\_\_\_\_ Number of Parking Spaces: Existing \_\_\_\_\_ Proposed \_\_\_\_\_

Print Information Below

**Property Owner's Name** \_\_\_\_\_

Street Address \_\_\_\_\_ City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Email Address \_\_\_\_\_

Print Information Below

**Applicant's / Developer's Name** \_\_\_\_\_

Street Address \_\_\_\_\_ City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Email Address \_\_\_\_\_

Print Information Below (Include Additional Contact Information on Next Page)

Check One: Owner's Attorney  Applicant's Attorney  Engineer  Surveyor  Other  If other, state relationship \_\_\_\_\_

**Representative's Name** \_\_\_\_\_

Street Address \_\_\_\_\_ City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Email Address \_\_\_\_\_

I hereby apply for Site Review and acknowledge that I will comply with all the ordinances and any stipulations of the Site Review Committee of the City of Portsmouth in the development and construction of this project.

Owner's Signature \_\_\_\_\_ Print Owner's Name \_\_\_\_\_ Date \_\_\_\_\_

Applicant's/Developer's Signature \_\_\_\_\_ Print Applicant's/Developer's Name \_\_\_\_\_ Date \_\_\_\_\_

Print Information Below

Check One: Owner's Attorney  Applicant's Attorney  Engineer  Surveyor  Other  If other, state relationship \_\_\_\_\_

**Representative's Name** \_\_\_\_\_

Street Address \_\_\_\_\_ City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Email Address \_\_\_\_\_

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**Representative's Name** \_\_\_\_\_

Street Address \_\_\_\_\_ City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Email Address \_\_\_\_\_

## Attachments

**The following materials must be submitted to the Planning Department along with the completed Application Form:**

- Site Plan Application Checklist
- Ten (10) stamped and folded copies of the site plan – four (4) full-size (22" x 34") and six (6) reduced (11" x 17")
- Digital copy of any plans and/or exhibits (in PDF format)
- Application Fee
- Any required State or Federal Permits