

TOWN OF CHESTER

Building Department

84 Chester Street
Chester, NH 03036
Office- 603.887.3636 Cell- 603.370.0175

www.chesternh.org



Rec By_

Date_

TENT INSTALL APPLICATION

Today's Date		24 Hour Notice for Inspections		
Street Address of Project	Zoning	ı	MAP	LOT
PROPERTY OWNER(S)				
NAME		• •		
ADDRESS				
PHONE	EMAIL ADDRESS			
	CONTRACTOR			
NAME				
COMPANY				
ADDDRESS				
CITY/STATE/ZIP				
PHONE	EMAIL ADDRESS			
TYPE OF JOB				
Size of Structure				
Erection Date Removal D				
(Not to exceed 180 days)				
Occupancy/ Use Group Anchoring method				
Certificate of Flame-Proofing Attached (Require	ed)			
SIGNATURES				
1) All work must conform to the State of NH Building and Fire Codes (2015 International Residential & Building Code) and				
current Chester building and zoning regulations. 2) If anchoring is by ballasting, an engineer's report (stamped by a NH licensed engineer) is required.				
3) Construction documents required.	(Staffiped by a NH ficefi	seu engineer) is requ	uireu.	
Applicant			Date	
**OFFICE USE ONLY **				
Received By			Date	
Building Inspector			Date	
Fire Department			Date	
[] Approved [] Denied				
PERMIT NO.		Amt \$	Ck #	ŧ