

**Town of Effingham**  
**Building Permit Application ~ For Campsite Activity**

A fee of \$30 must accompany this application. Make check payable to: Town of Effingham.

*Fee paid [ ]*

*(date received)*

Property Owner(s): \_\_\_\_\_ Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Zip: \_\_\_\_\_

The undersigned hereby requests permission for the described improvements in this application and attached documents. Permit is void in the event of misrepresentation and/or non-compliance with the zoning ordinance, site plan review and subdivision regulations (if applicable) and any other applicable State and Town laws and regulations.

**I authorize the Town of Effingham to enter my property to review the specifics of this application.**

**I understand that the Town of Effingham reserves the right to take up to 30 days to make a decision on this application.**

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

\_\_\_\_\_  
*Date*

**Property Information - Name of campground:** \_\_\_\_\_

Project Location: Tax Map # \_\_\_\_\_ Lot # \_\_\_\_\_ Area \_\_\_\_\_ Site # \_\_\_\_\_

Street name and address of project location: \_\_\_\_\_

What is the property's existing use? Please check one: Residential [ ]; Business [ ]; Other [X] campsite describe

Does this application include a change of use? \_\_\_\_\_ **Is this property in a special flood hazard area?** \_\_\_\_\_

Please describe the proposed work. You must include the dimensions of any structures. \_\_\_\_\_

Please answer the following questions:

1 - What is the square footage of the campsite in question? \_\_\_\_\_

2 - What is the total square footage of all structures (including the RV or camper) now on the campsite? \_\_\_\_\_

3 - Did this campsite exist prior to the year 2000? [ ] yes [ ] no

4 - Is this structure(s) replacing an existing structure? [ ] yes [ ] no

5 - Does the campsite have 2 parking spaces at 160sf each or designated parking elsewhere? [ ] yes [ ] no

• Campgrounds: Please provide sketch of site and work to be done. Incomplete applications will be returned

**Please read and sign the following statement if you, as owner, designate an agent (co-applicant) to act on your behalf.**

I designate the person listed below as my agent for the purpose of procuring the necessary zoning compliance certificate for the proposed work as described herein. Representations made by my agent may be accepted as though made by me personally.

I understand that I am bound by any official decision made on the basis of such representations.

Camper's Name: \_\_\_\_\_ Telephone# \_\_\_\_\_

Camper's Home Address: \_\_\_\_\_

Owner's Signature(s) \_\_\_\_\_

Campground owners

Please use this section for campsite applications.

**Return completed form to the Selectmen's Office, or mail to: Town of Effingham, 68 School Street, Effingham, NH 03882**

*Office use only*

Date of Site Visit \_\_\_\_\_ Reviewed file [ ] Date Application Approved \_\_\_\_\_ Date Application Denied \_\_\_\_\_

Reason for denial \_\_\_\_\_

**Article** \_\_\_\_\_ **Section** \_\_\_\_\_ Special exception required \_\_\_\_\_ Variance required \_\_\_\_\_

Additional Permits or Approvals Required \_\_\_\_\_

Signature of authorized official \_\_\_\_\_ (stamp)