



BUSINESS USE CERTIFICATE APPLICATION

Town of Farmington, New Hampshire
Planning and Community Development
356 Main Street, Farmington, NH
Telephone: (603) 755-2774

OFFICE USE ONLY:

Original BP: _____

Issue Date: _____

Expiration: _____

Map # _____

Lot # _____

Zoning _____

The purpose of this form is to assist the Planner in rendering a decision regarding the adherence of proposed development to the Town of Farmington Zoning Ordinance.

Name of Proposed Business _____

Address of Proposed Business _____

Applicant(s) Name _____

Applicant(s) Mailing Address _____

Phone Number _____ Email Address _____

Owner(s) of Record _____

Owner(s) Residence Address and Mailing (if different) _____

DESCRIPTION OF PROPOSED ACTIVITY

Please describe in detail the activities that will take place at this location.

Please supply information pertaining to the type of business you wish to conduct. *Example: Name of Business, hours of operation, number of employees, retail (what will be sold) and/or services (what services will be offered).* This will allow the Planner to determine whether or not the proposed activity is allowed in accordance with the Town of Farmington Zoning Ordinance.

Applicant Signature _____

Date _____

PLEASE NOTE:

If this application is *approved*, you may apply for a building permit. If the proposed use required a Site Plan Review by the Planning Board, the Planner will advise you of the procedure.

If this application is *denied* you may apply for a Special Exception or a Variance as appropriate. The Planner will advise you of the procedure.

Any change in use or expansion would require Site Plan Review and approval from the Planning Board.

Any improvements to the building, i.e. electrical, plumbing, gas, or mechanical will require permits by NH licensed contractors prior to any commencement of work.

A sign permit is required prior to any signage being located on the lot or building. Sign permit applications are available in the Planning & Codes Office.

Prior to opening for business, you must contact the Executive Administrative Assistant at 603-755-2208 to schedule an inspection with the Fire Department to ensure Life Safety Compliance as well as with this Department at 603-755-2774 to schedule an inspection for Zoning Compliance.

***** OFFICE USE ONLY *****

☐ This activity is allowed in the _____ Zone. This is an activity that can be conducted in conformance with the Farmington Zoning Ordinance.

☐ This activity is allowed in the _____ Zone, however, the dimensional requirement or setback requirements cannot be met.

☐ This activity is not permitted in this zone; therefore, this application is **denied**.

Planning Department

Date

Code Enforcement

Date