

PLEASE PRINT OR TYPE

STATE OF RHODE ISLAND
BUILDING PERMIT APPLICATION

MUNICIPALITY EXETER ISSUED _____ NUMERICAL CODE _____ PERMIT NO. _____
 APPLICATION DATE _____ CENSUS TRACT _____ FEE REC. \$ _____ FEE BY _____

1. STREET LOCATION _____ 2. ZONING DISTRICT _____
 3.4.5. PARCEL ID _____ 6. AREA _____ 7. REHAB CODE (Circle) Yes No
 8. USE OF STRUCTURE: PREVIOUS _____ PROPOSED _____
 9. OWNER _____ TEL. NO. _____
 10. CONTRACTOR _____ IN-STATE? Yes No TEL. NO. _____
 11. CONTRACTOR ADDRESS _____ 12. REG #: _____ 13. EXP: _____
 14. ARCH. OR ENG. _____ ADDRESS _____ TEL. NO. _____
 15. RHODE ISLAND REG. NO. _____ 16. Stamped Prints (Circle one) Yes No 17. Certificate of Occupancy Required Yes No

18. DESCRIPTION OF WORK TO BE PERFORMED _____

19. USE OF EACH FLOOR

Bsmt.
1st
2nd
3rd
Other

CODE EDITION: _____

A. TYPE OF IMPROVEMENT	B. OWNERSHIP	C. PRINCIPAL TYPE OF CONSTRUCTION
1. _____ NEW STRUCTURE 2. _____ ADDITION TO EXISTING 3. _____ MODIFICATION TO EXISTING 4. _____ FOUNDATION ONLY	PUBLIC 1. _____ STATE 2. _____ CITY OR TOWN 3. _____ OTHER, SPECIFY: _____ PRIVATE 4. _____ TAXABLE 5. _____ TAX EXEMPT	(CONSTRUCTION CLASS (Check one)) 1. 1A _____ 4. 2B _____ 7. 4 _____ 2. 1B _____ 5. 3A _____ 8. 5A _____ 3. 2A _____ 6. 3B _____ 9. 5B _____

D. PROPOSED USE RESIDENTIAL	E. PROPOSED USE NON-RESIDENTIAL	F. RESIDENTIAL Complete for new buildings and reconstructions
1. _____ R-1 HOTELS 2. _____ R-2 APARTMENTS 3. _____ R-3 One and Two Family Attached 4. _____ R-4 ASSISTED LIVING 9-16 5. _____ GARAGE 6. _____ CARPORT 7. _____ MANUFACTURED HOME 8. _____ SWIMMING POOL 9. _____ One and Two Family Detached 10. _____ FIREPLACE 11. _____ OTHER SPECIFY _____	1. _____ A-1 THEATRES 2. _____ A-2 RESTAURANT/ NIGHT CLUB 3. _____ A-3 ASSEMBLY 4. _____ A-4 ARENAS 5. _____ B BUSINESS 6. _____ F-1 FACTORY(mod haz) 7. _____ F-2 FACTORY(low haz) 8. _____ H-1 HIGH HAZARD DETONATION 9. _____ H-2 HIGH HAZARD DEFLAGRATION 10. _____ H-3 HIGH HAZARD PHYSICAL HAZARD 11. _____ H-4 HIGH HAZARD CORROSIVE TOXIC 12. _____ H-5 HIGH HAZARD - HPM 13. _____ I-1 INSTITUTIONAL SUPERVISED 14. _____ I-2 INSTITUTIONAL INCAPACITATED 15. _____ I-3 INSTITUTIONAL RESTRAINED 16. _____ I-4 INSTITUTIONAL DAYCARE 17. _____ M MERCANTILE 18. _____ S-1 STORAGE MOD HAZARD 19. _____ S-2 STORAGE LOW HAZARD 20. _____ U UTILITY MISCELLANEOUS 21. _____ OTHER SPECIFY _____ 22. _____ MIXED USE	SINGLE FAMILY 1. _____ TOTAL SINGLE FAMILY UNITS 2. _____ TOTAL NO. OF BEDROOMS TOTAL # OF BATHS 3. _____ FULL 4. _____ HALF MULTI FAMILY 5. _____ TOTAL NO. OF KITCHENS TOTAL # OF BATHS 6. _____ FULL 7. _____ HALF TOTAL NO. OF APARTMENTS BY NO. OF BEDROOMS 8. Effic. _____ 9. 1 _____ 10. 2 _____ 11. 3 _____ 12. 4 _____ 13. 5 _____ 14. _____ MORE, Please Specify 15. _____ TOTAL NUMBER OF BUILDINGS IN PROJECT

G. FOUNDATION SETS BACK FROM PROPERTY LINES	H. DIMENSIONS	I. ESTIMATED COST MATERIAL AND LABOR
1. FRONT _____ 2. REAR _____ 3. LEFT SIDE _____ 4. RIGHT SIDE _____	1. No. of Stories _____ 2. Basement: Yes ___ No ___ MAX. MAX. 3. Height of Construction Ft. _____ WIDTH _____ DEPTH _____ 4. Total Floor Area Sq. Ft. w/o Basement _____	1. GENERAL COST \$ _____ TO BE INSTALLED BUT NOT INCLUDED IN THE ABOVE COST 2. ELECTRICAL \$ _____ 3. PLUMBING AND PIPING \$ _____ 4. HEATING, AIR COND. \$ _____ 5. FIRE SUPPRESSION \$ _____ 6. OTHER, ELEVATOR, ETC. \$ _____ TOTAL COST \$ _____

J. FLOOD HAZARD AREA-1.YES 2.NO	K. TYPES OF SEWAGE DISPOSAL	O. FEES
1. Elev. (MSL) of lowest floor incl. basement _____ 2. Elev. (MSL) of 100 year flood _____	1. _____ PUBLIC 2. _____ PRIVATE SYSTEM 3. ISDS NO. _____ DATE _____	RADON FEE \$ _____ MUNICIPAL BUILDING PERMIT FEE \$ _____ CE/JADA FEE \$ _____ TOTAL PERMIT FEE \$ _____ 1 & 2 FAMILY DWELLING LIMITED TO CE/JADA FEE OF \$50.00 BUILDING OFFICIAL'S SIGNATURE _____

L. NUMBER OF OFF-STREET PARKING SPACES	M. TYPE OF WATER SUPPLY	N. EQUIPMENT
1. ENCLOSED _____ 2. OUTDOORS _____	1. _____ PUBLIC 2. _____ PRIVATE 3. _____ INDIVIDUAL WELL	State Approval Required 1. INCINERATOR _____ 2. ELEVATOR _____ (Enter Number)

I hereby certify that I have the authority to make the foregoing application, that the application is correct, and that the owner of this building and the undersigned agree to conform to all applicable codes and ordinances of this jurisdiction.

APPLICANT'S SIGNATURE _____ DATE _____ TEL. NO. _____

C0

SEE REVERSE SIDE