TOWN OF HOOKSETT
Technical Review Committee (TRC)
Application

DATE__________________________
APPLICATION #________________
ESCROW PAID $________________
CHECK #_______________________

SITE LOCATION:___________________________Map: ____Lot(s): ____Zone:____
(Street address)

OWNER
NAME: __________________________
ADDRESS: ______________________
TEL: ___________________________
FAX: ___________________________
E-MAIL: ________________________
SIGNATURE: ____________________

APPLICANT
NAME: ___________________________
ADDRESS: _______________________
TEL: ___________________________
FAX: ___________________________
E-MAIL: _______________________
SIGNATURE: ____________________

LAND SURVEYOR/ENGINEER/ARCHITECT:______________________________
ADDRESS: ______________________
TEL: ___________________________
FAX: ___________________________
E-MAIL: _______________________

DESCRIPTION OF PROJECT: (attach additional information, if necessary)
________________________________________________________________________

“X” below, as appropriate

Water: ____ Central ____ Village ____ Manchester ____ private well

Sewer: ____ Town ____ private septic

Conservation: _____ wetlands _____ Groundwater Resource Conservation District

Please contact the Community Development Department for further information at (603) 268-0279.

Thank you!

TRC Application 11/29/10