Permit Number: __ __ __ __ __ __ __ __

TOWN OF HILLSBOROUGH, NH
RECREATIONAL VEHICLE PERMIT APPLICATION

During the **Months** of_____, _____ (90 days Maximum)

Date Filed: _____

Property Owner Name: _____

Property Address: _____Tax Map _____Lot_____ Zone_____

Mailing Address (if different) _____

Telephone Number: _____E-mail address: _____

Property Address/Camper Site

Same as Property Address ☐ Property Address if different_____

RV Type and Size (include sleeping capacity) _____

_____

How is gray and black water to be disposed of? _____

_____

_____

I certify that to the best of my knowledge all information herein provided is true and correct. I authorize the Members of the Board of Selectmen or their agent to enter onto my property to inspect my premises.

_____

Owner's Signature Date

_____ _____ _____

Approved Denied Building Inspector/Hillsborough Official

Denied for the following reason(s):

_____

_____

_____

_____