

State of New Hampshire

DEPARTMENT OF SAFETY

DIVISION OF STATE POLICE

MARINE PATROL

31 DOCK ROAD

GILFORD, N.H. 03249-7627



John J. Barthelmes
Commissioner of Safety

APPLICATION FOR SWIM LINE PERMIT

(PLEASE TYPE OR PRINT)

NOTE: Swim Line Permits are required on ALL public bodies of water.

DIRECTIONS: Complete this form and return it to the address indicated above.

INCOMPLETE APPLICATIONS WILL BE RETURNED.

1. Check One: This is a NEW application RENEWAL application

2. Type of swim area for which permit is requested:

a. Private / Individual

c. Public:

1. Town Owned

b. Private Group / Association

2. State Owned

Name of Association: _____

3. a. Property Owner: _____ DOB: _____ Day Phone: _____

Mailing Address: _____ Evening Phone: _____

Town: _____ State: _____ Zip: _____

b. Person completing application: _____ DOB: _____ Day phone: _____

Mailing Address: _____ Evening Phone: _____

Town: _____ State: _____ Zip: _____

4. Swim Line Location:

a. Body of Water: _____

b. Shorefront Property Street Address: _____

Town: _____ State: _____ Zip: _____

c. Lot Number and Tax Map Number: _____

d. Name / address of abutters to your shore front property:

1. _____

2. _____

UNLESS A SWIM LINE VARIANCE IS REQUESTED AND APPROVED, NO SWIM LINE SHALL BE PLACED BEYOND THE POINT WHERE THE DEPTH OF WATER EXCEEDS 6 FEET OR FOR A DISTANCE FROM SHORE OF 50 FEET, WHICHEVER OCCURS FIRST.

SWIM LINES NOT PLACED IN ACCORDANCE WITH THE TERMS OF THE APPROVED PERMIT MAY BE REMOVED AND THE SWIM LINE PERMIT REVOKED

5. Please complete the following (check one):

a. Are you requesting a variance? Yes No

b. If you are requesting a variance, please clearly state the reason(s) for this request. You must also descriptively state the water depth and distance from shore at the point where you are requesting that the swim line be located (Saf-C 404.08).

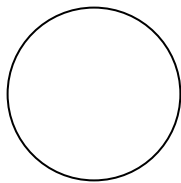
4. Please provide a diagram / map which shows the following (The map must be accurate in relation to North):

- a. Your shore line and property lines (indicate feet).
- b. Proposed location of swim line and depth of water in feet.
- c. Length of swim line.
- d. Locations, dimensions and distance in feet of moorings, docks, boat houses, breakwaters located off your shore front.
- e. The shore lines and property lines of your abutters in feet.
- f. Locations, dimensions and distances (in feet) of swim lines, moorings, docks, and rafts located off your abutters water fronts.
- g. Unsigned applications will be returned.

Signature of Applicant

Date

DIAGRAM:



With an arrow, please indicate North



FOR OFFICIAL USE ONLY:

Applicant: _____

Body of Water: _____

1. Field investigation notes: _____

2. Approval status recommendation:

Approve as submitted.

Approve with the same conditions as prior years:

Approve with the following conditions: _____

Deny: Please provide reason for recommendation of denial. _____

Signed: _____

Date: _____