

PLUMBING APPLIANCE PERMIT Application

BOILER / WATER HEATER / SOLAR CONTAINERS

DATE: _____



CODE ENFORCEMENT DEPARTMENT
Phone: (603) 527-1293 / FAX: (603) 527-1266

OWNER:
BUILDING ADDRESS:
OWNER'S MAILING ADDRESS:
OWNER'S TEL. NO:

PLUMBER:
BUSINESS ADDRESS:
PLUMBER'S TELEPHONE NO:
CELL NO:
ESTIMATED JOB COST: \$

FEE: **CHECK NO:** **CASH:**

TYPE OF BUILDING:
ONE/TWO FAMILY **MULTI-FAMILY** **COMMERCIAL** **OTHER**

NATURE OF WORK:
ADDITION **ALTERATION** **REPAIR** **OTHER**

DESCRIBE THE TYPE OF INSTALLATION PROPOSED:

SIGNATURE OF PLUMBER: _____

CODE OFFICIAL'S APPROVAL: _____ **DATE:** _____