

Town of North Hampton

Permit Application

Electrical, Plumbing, Mechanical, Septic Bed Bottom, or Demolition Projects

Property Owner

Name _____

Address _____

Phone _____

Permit Number _____

Date Issued _____

Location of Property _____

Map - Lot - Parcel _____ - _____ - _____

Contractor (applying for permit)

Company _____

Name (contact person) _____

Address _____

Phone _____

Type of Permit (circle)	Residential	Commercial
Electrical	ER	EC
Plumbing	PR	PC
Mechanical	MR	MC
Demolition	DR	DC
Septic Bed Bottom Inspection	BR	BC

Oil Burner Permit (FD) _____

Description of Work: _____

NO LP TANKS UNDER EVES-STEEL RISERS
REQUIRED FOR LINES EMERGING FROM
GRADE FOR MECHANICAL PROTECTION

Fee Effective July 1, 2013

Fee required: \$50.00

Date Received _____

Check # _____

I agree that all construction will comply with IBC 2009, NEC 2014, IPC 2009, IMC 2009 and ALL local ordinances. I understand that construction must begin within twelve (12) months of the date of issuance of the Permit. I agree to allow inspections, and certify that all statements are true to the best of my knowledge.

Minimum of 24 hours to schedule inspections. 964-8650

Signatures:

Applicant _____

Date _____

DO NOT START THE WORK- THIS IS NOT A PERMIT- YOU WILL BE CALLED WHEN IT IS APPROVED

Building Inspector _____

Date _____