

TOWN OF STRAFFORD

INCORPORATED 1820

NEW HAMPSHIRE

OFFICE OF THE BUILDING INSPECTOR

12 Mountain View Drive Strafford, NH 03884

MECHANICAL-GAS PERMIT APPLICATION

Please complete all applicable information listed below	
ADDRESS/LOCATION:	
INSTALLATION COMPANY:	
INSTALLER LICENSE NO:	-MASTER ONLY
APPLICANT PHONE NUMBER:	EMAIL:
TYPE OF BUILDING/PROJECT:	
PROPERTY OWNER NAME	PHONE#
_	Permit Information
<u>ITEM</u>	SIZE/QUANTITY
GENERATOR	
PROPANE TANK	
FURNACE/BOILER	
COOK STOVE	
HOT WATER HEATER	
VENTING	
GAS PIPING	
COST OF CONSTRUCTION: \$	TOTAL SQUARE FT OF CONSTRUCTION:
Description of work to be perform	ed:
As Applicant I swear to the best of my knowledge that all information above is accurate. This signed application constitutes consent on the applicant's part to allow for inspections at the property by Code Enforcement, Assessing Office, & Fire Department. The undersigned hereby agrees that the proposed work shall be done in accordance with all State and Town Building codes, Setbacks, & regulations. Applicant will notify the Building Inspector when ready for final inspection. Fire Department approval may be required. A dwelling may not be occupied without signed Certificate of Occupancy or Use.	
Applicant Signature:	Date:
(INFORMATION BELOW COMPLETED BY BUILDING INSPECTOR)	
(11.12.0111)	
Building Inspector Signature:	Date:
PERMIT APPROVED PERMIT #	
Permit Cost (Completed by Building Inspector)	
GAS PERMIT - \$50 for 1 ST 1500 SF/\$10 for each additional 500 SF Paid: \$	
Notes/Conditions:	