

Town Of Pelham Building Department  
6 Village Green  
Pelham, NH 03076  
(603) 635-7811

**GAS PIPING PERMIT APPLICATION**

**For office use only**

ML# \_\_\_\_\_

Permit # \_\_\_\_\_

Paid \_\_\_\_\_

CONTRACTORS LICENSE NO. \_\_\_\_\_ DATE: \_\_\_\_\_

LOCATION: \_\_\_\_\_

OWNER: \_\_\_\_\_

KIND OF BUILDING \_\_\_\_\_ USED AS \_\_\_\_\_

TO BE COMPLETED ABOUT \_\_\_\_\_ ESTIMATED COST \$ \_\_\_\_\_

NEW – ALTERATION – REPAIR – ADDITION (Circle One)

GAS  LPG

TYPE OF EQUIPMENT	NUMBER
Air Cond. Units –H.P Ea.	[ ]
Refrigeration Units – H.P Ea.	[ ]
Boilers – H.P Ea.	[ ]
Forced Air Systems – B.T.U.	M Ea. [ ]
Gravity Systems – B.T.U.	M Ea. [ ]
Floor Furnaces – B.T.U.	M [ ]
Wall Heaters – B.T.U.	M [ ]
Unit Heaters – B.T.U.	M [ ]
Conversion Burner	[ ]
Clothes Dryers	[ ]
Ventilation Fan	[ ]
Range Hood	[ ]
Air Handling	C.F.M. [ ]
Incinerator	[ ]
Gas Piping	[ ]
Range COM. <input type="checkbox"/> DOM. <input type="checkbox"/>	[ ]

CONTRACTOR'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

**OWNER'S PHONE NUMBER (REQUIRED)** \_\_\_\_\_

*\*Owner's Phone Number is not required for new construction, or un-occupied dwelling units*

APPLICANT CERTIFIES THAT ALL INFORMATION GIVEN IS CORRECT AND THAT ALL PERTINENT MECHANICAL ORDINANCES WILL BE COMPLIED WITH IN PERFORMING THE WORK FOR WHICH THIS PERMIT IS ISSUED.

\_\_\_\_\_  
Signature of Contractor or his/her Authorized Representative Making Application