

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

<u>For office use only</u>
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