



Permit No. _____
Permit Fee _____
Payment Type _____
Date Paid _____
Rec'd by _____
Copy: Applicant / Tax Dept.

Plumbing Permit Application

Name of Property Owner _____ Tax Map _____ Lot _____
Mailing Address _____
Street _____ Town _____ State _____ Zip _____
Physical Location in Newport _____ Zoning District _____
Telephone No. _____ Other contact info/email: _____
Type of Building (please circle) Residential (Single Family) Commercial Multi-Family# _____
Type of Improvement (please circle) New Repair Alteration
Please describe work and/or attach plans (or estimate) _____

Estimated construction cost \$ _____

Name of Contractor _____ Telephone _____
Mailing Address _____ License Number* _____

*please attach a copy of current license
I hereby grant permission for code inspectors to enter on this property for inspections related to the project described herein and further attest that all of the information provided on this permit application is true and accurate to the best of my knowledge. The applicant agrees that all work and materials shall comply with the applicable edition of the State of NH Building Code and all laws. I also certify that I have been authorized by the Owner to apply for this permit.

Signature of Owner Date

Signature of Contractor Date

THIS PERMIT MUST BE POSTED IN A VISIBLE LOCATION WHILE THE PROJECT IS UNDER CONSTRUCTION.

THE BUILDING INSPECTOR CAN BE REACHED AT 863-6278.
CALL AT LEAST 48 HOURS PRIOR TO SCHEDULE THE REQUIRED INSPECTIONS:
_____ Rough Plumbing _____ Finish Plumbing
BUILDING INSPECTOR APPROVAL

AUTHORIZED SIGNATURE DATE