PERMIT NUMBER	DATE			F SANDOWN
INSPECTOR'S PHONE NUMBER: 603.	.702.3207		LECTRICA	L PERMIT
N.H. MASTER LICENSE NO.	MAP		LOT	
LOCATION				
OWNER			28	
KIND OF BUILDING			JSED AS	
NEW	ALTERATION	PAIR • A	DDITION	
PLEASE PROVIDE A JOB DESCI	RIPTION AND LIST ALL SERVIC	ES, EQUIPMEN	T, SWITCHES, RECE	PTACLES, ETC:
		TO THE PERSON AND PROPERTY OF		
	Commence of the Commence of th			
				4
CONTRACTOR NAME			TOTAL FEE	
CONTRACTOR ADDRESS			PHONE #	
CITY		STATE	ZIP COD	E
READY FOR INSPECTION ON	OR WILL	CONTACT PE	RMIT CLERK LATER	
PERMITS ARE VALID FOR 1 YEAR FRO				
APPLICANT CERTIFIES THAT ALL INFO WILL BE COMPLIED WITH IN PERFOR				RICAL ORDINANCES
х		x		
Signature of Contractor or his Au Representative Seeking Appli	uthorized		Signature of Permit C	lerk