

SANDOWN NEW HAMPSHIRE APPLICATION FOR PERMIT TO DO PLUMBING

Date _____, 20____ Map _____ Lot _____

Property Address _____ Owner Name _____

Owner Tel # _____ Type of Occupancy _____

New Renovation Replacement Plan submitted Yes No

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	WATER CLOSETS	KITCHEN SINKS	LAVATORIES	BATH TUBS	SHOWER STALLS	DISHWASHERS	DISPOSERS	LAUNDRY TRAYS	WASH MACH CONN	HOT WATER TANKS	TANKLESS	SLOP SINKS	FLOOR DRAINS	URINALS	DRINKING FOUNTAIN	AREA DRAIN	WATER PIPING	BACKFLOW PREV.	OTHER FIXTURES
SUB-BSMT																			
BASEMENT																			
1ST FLOOR																			
2ND FLOOR																			
3RD FLOOR																			
4TH FLOOR																			

Installing Company Name _____

Address _____

Business Telephone # _____ Best contact # (cell phone) _____

Name of Master License Plumber _____

I hereby certify that all of the details and information I have submitted (or entered) in above application are true and accurate to the best of my knowledge and that all plumbing work and installation performed under the permit issued for this application will be in compliance with all pertinent provisions of IPC Code.

Amount _____

Signature of Master Licensed Plumber

Cash _____ Check # _____

License Number _____

Received by _____