TOWN OF HAMPTON FALLS
1 Drinkwater Road
Hampton Falls, NH 03844
(603) 926-4618 ext 5

ELECTRICAL/PLUMBING/MECHANICAL PERMIT

DATE:_____ TAX MAP#_____ LOT#_____ FEE $_____

CONTRACTOR'S LICENSE #_____

LOCATION: _____ BLDG PERMIT #_____

OWNER: _____

DESCRIPTION OF BUSINESS _____

RESIDENTIAL USE; SINGLE FAMILY-ACCESSORY DWELLING-MULTI FAMILY

(circle one) NEW ALTERATION REPAIR ADDITION

DESCRIPTION OF WORK: ESTIMATED COST:_____

_____

_____

_____

_____

Contractor's
Name_____Address_____

City_____State_____ZIP_____Phone #_____

E-mail_____

Ready for Inspection on _____or will contact permit clerk later _____

Applicant certifies that all information given is correct and that all pertinent town ordinances will be complied with in performing the work for which this permit is issued.

_____ _____
Signature of Licensed Master Signature of Inspector or Permit Clerk

MAKE CHECKS PAYABLE TO TOWN OF HAMPTON FALLS - $50.00 plus $5 per thousand over $5,000
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Rev. 1/2014