## **CITY OF FRANKLIN, NEW HAMPSHIRE**

OF FRAVILLA SERVICE AND SHOW HAMPSHOW

"Three River's City"

Planning and Zoning Department 316 Central Street Franklin, NH 03235 Tel: (603) 934-2341 Fax: (603) 934-7413

Мар:
Lot:
Block:
Zone:

## **Plumbing Permit Application**

Primary Use of Property:	Res	idential Commercial	Municipa	Other	
Property Owner:			_ Phone #:_		
E-mail:			<u> </u>		
Contractor:			_ Phone #:_		
Mailing Address:					
Master Plumber: NH Ma			ber #:	Exp:	
E-mail:					
Applicant information:	Owne	r Contractor Other au	:horized age	ent. <b>IF OTHER</b> please fill in th	ne info belo
		 Phone #:	_	·	
Nume		THORE ".			
FIXTURE	#	FIXTURE	#	FIXTURE	#
Water Distr. Syst.	π	Dishwasher - Res	π	Stacks	π
Waste System		Garbage Disposal		Sinks	
Water Tank/Heater		Laundry Tray/ Wash Sink		W C / Toilet	
		Washing Machine		Lavatory	
				-	
Floor Drains		Special Wastes		l Showers	
Floor Drains Sewage Ejector		Special Wastes Rainwater Leaders		Showers Urinal	
Floor Drains		Special Wastes Rainwater Leaders Backflow Preventer		Showers Urinal Other	

**Note:** it is the responsibility of the property owner/project manager to ensure that all contractors employed to do work have applied and received all necessary permits. It is also the responsibility of same to ensure that all inspections required are completed. If work has not begun within 6 months of issuance, permit it becomes null and void.

If this is an "After the Fact" permit, it will be subject to a fee two times the normal permit fee.

Plumbers must have a valid license from the State of New Hampshire to obtain a permit. Permits are not transferable.

The property owner of record may exercise their right to perform their own plumbing work on their residence if it is a single-family dwelling and owner occupied.

## This signed application constitutes consent on the applicant's part to allow for all inspections at the property location listed.

No permit will be issued until all of the above information is furnished, and all the above conditions met.

## **INSPECTIONS REQUIRED**:

- 1. When under slab piping has been installed.
- 2. When rough-in is complete and visible (rough).
- 3. When job is complete, but before occupancy (final).

The Planning/Zoning/Building Department approval would certify that the applicant could proceed with installation of plumbing fixtures in accordance with specifications submitted. Any deviation from the specifications submitted will require an amendment to this permit or additional permits. If you have any questions, feel free to contact the Building Inspector office at 603-934-5680.

**Statement of Compliance:** I have read and understand the statement and hereby agree to all of the terms stated therein. I agree to abide by any and all codes relating to my field of work, including all national, state and local codes. I also realize that any false statement made in the application for permit may be grounds for revocation of said permit.

Cost of Construction:			
Applicant Signature		Date	
Office Use Only			
Permit Fee:	Cash	Check Check #	
<ul><li>□ Approved</li><li>□ Denied</li></ul>	Approval Signature:		