TOWN OF BRENTWOOD
PLUMBING PERMIT

Site Location (street address): _____

Owner Name: _____ Phone: _____

Owner Address; _____

Contractor: _____

Contractor Address: _____

Contractor Phone #: _____

NH License: _____ *(Please produce your license to be photostated)*

☐ Residential ☐ Commercial ☐ Industrial ☐ Other _____

☐ New Construction ☐ Alteration / Repair

Work to be Done:

Sinks: _____ Floor Drains: _____ Urinals: _____

Baths: _____ Sewage Ejector: _____ Dishwashers: _____

Lavatories: _____ Toilets Disposals: _____

Tank & Heater: _____ Showers: _____ Washing Machines: _____ Other: _____

Describe Work to be Done:

_____

_____

Estimated Cost: $ _____

Tax Map _____

Lot _____

Fee _____

Note: A check made payable to the "Town of Brentwood" must be submited with the application. Application fee is $50 +$10 per fixture- max $140. Any balance due must be paid prior to the permit being released to the applicant.

For inspection call 642-6400 ext. 18 Email kkaiser@brentwoodnh.gov

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

_____
Contractor Signature

Permit Approved: _____
Building Inspector

Date: _____ **Permit #** _____

_____
_____
_____
_____
_____
Selectmen