

**MECHANICAL / GAS**

Date Rcvd: \_\_\_\_\_  
Ck #: \_\_\_\_\_ / Cash  
Receipt #: \_\_\_\_\_  
Mail / Pick-up



Permit # \_\_\_\_\_  
Permit Fee \$ \_\_\_\_\_

**TOWN OF SEABROOK, NH**  
**APPLICATION FOR MECHANICAL / GAS PERMIT**  
Application must be in ink and legible

Project Address: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Lot: \_\_\_\_\_ Seq.: \_\_\_\_\_ Zoning District: \_\_\_\_\_  
Property Owner: \_\_\_\_\_ Tele #: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Address: \_\_\_\_\_  
Mechanical Contractor: \_\_\_\_\_ Tele #: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Address: \_\_\_\_\_  
Licensed NH Gas Fitter \_\_\_\_\_ License #: \_\_\_\_\_ (Copy of Photo ID / License Required)  
Address: \_\_\_\_\_ Tele #: \_\_\_\_\_ E-mail: \_\_\_\_\_

DESCRIPTION OF WORK      Commercial \_\_\_\_\_      Residential \_\_\_\_\_

**Residential Permit Fee: \$25.00 Plus \$6.00 per thousand of the estimated cost, or any part thereof**  
**Commercial Permit Fee: \$50.00 Plus \$6.00 per thousand of the estimated cost, or any part thereof**

- I hereby certify, under penalties of perjury, that the estimated cost of the above listed work, including all labor and materials is \$\_\_\_\_\_.
- I hereby certify that all plans and construction will comply with all Town of Seabrook and State of NH codes, ordinances, and regulations and that the project will be accessible for any and all inspections pertaining to this application.

➤ **Signature of Contractor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

➤ **Approved:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Town of Seabrook

TO SCHEDULE AN INSPECTION CALL (603) 474-3871 ( 24 HOUR NOTICE PREFERRED )