



Town of New Durham
Building Inspector/Code Enforcement Officer/ Health Officer
4 Main St. P O Box 207 New Durham, NH 03855
603.859.2091 Fax 603.859.6644 ndassist@metrocast.net

PLUMBING PERMIT \$50.00

DATE _____
OWNER _____ PHONE # _____
ADDRESS _____
NAME OF INSTALLER _____ PHONE # _____
BUSINESS NAME _____ LICENSE # _____
BUILDING PERMIT # _____ MAP # _____ LOT # _____
ESTIMATED COST OF PROPOSED WORK \$ _____

DESCRIPTION OF WORK TO BE PERFORMED:

- SINGLE FAMILY MODULAR MULTI FAMILY OTHER
 NEW WORK
 RENOVATION / RELOCATION OF EXISTING PLUMBING
 REPLACEMENT OF EXISTING MECHANICAL APPLIANCE
 HOOK – UP TO PRIVATE SEPTIC SYSTEM
 HOOK – UP TO PUBLIC SEWAGE SYSTEM
 OTHER _____

ALL WORK IS TO BE IN COMPLIANCE WITH THE INTERNATIONAL
PLUMBING CODE, AS ADOPTED BY THE STATE OF N.H.

SIGNATURE OF INSTALLER _____
N.H. MASTERS LICENSE # _____ EXPIRATION DATE _____

Please bring a current photo I.D. and your N.H. state plumbing license to the office before work begins.

***** FOR OFFICE USE ONLY *****

Building Inspector/Code Enforcement Officer _____ Date _____
PO Box 207, 4 Main St, New Durham, NH 03855
Office 603-859-0516 Fax 603-859-6644 Web Site: www.newdurhamnh.us
E-mail ndbldinsp@metrocast.net