



# TOWN OF RAYMOND

Building Department  
 Office of Code Enforcement  
 4 Epping Street  
 Raymond, NH 03077

Tel: (603) 895-7020  
 Fax: (603) 895-7064  
<http://www.raymondnh.gov>

## Plumbing Permit Application

### Property Information - Where is the work being proposed?

Address: \_\_\_\_\_ Tax Map#: \_\_\_\_\_ Lot #: \_\_\_\_\_

Building's Use: \_\_\_\_\_

### Owner Information - Who owns the property where the work is being proposed?

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Owner Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Contractor Information

Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Master Plumber's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Master Plumber's License Number: \_\_\_\_\_

### Additional Project Details - Please complete.

ITEM	NUMBER REQUESTED
Water Closet	
Lavatory	
Sink	
Hand Sink	
Shower	
Floor Drain	
Water Softener	
Urinal/Toilet	
Irrigation System	
Utility Sink	
Water Heater (see right)	

Estimated Project Cost: \_\_\_\_\_

Water Heater Type: \_\_\_\_\_

Water Heater Make: \_\_\_\_\_

Water Heater Model: \_\_\_\_\_

**Project Description - Describe the work being proposed.**

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**Signature of Applicant - Please sign the applicable section**

CONTRACTOR DOING WORK

\_\_\_\_ I certify that I have authorization from the owner of the property listed above to apply for this plumbing permit and that I will be installing the plumbing in accordance with applicable Federal, State and Local laws, regulations, codes and ordinances. I also understand that I am responsible for ensuring all inspections will be completed as required by the Town of Raymond.

Attest: \_\_\_\_\_  
Signature of Applicant

Date: \_\_\_\_\_

OWNER DOING WORK (applies to residential applications ONLY)

\_\_\_\_ I certify that I own and occupy the dwelling listed above, and will be installing the plumbing myself in accordance with applicable Federal, State and Local laws, regulations, codes and ordinances. I also understand that I am responsible for ensuring all inspections will be completed as required by the Town of Raymond.

Attest: \_\_\_\_\_  
Signature of Applicant

Date: \_\_\_\_\_