



TOWN of BRENTWOOD NH

PLUMBING PERMIT APPLICATION

\$100. FINE IF PERMIT IS NOT POSTED AT TIME OF INSPECTION

PROPERTY ADDRESS: _____ .Map. _____ Lot. _____ .-. Zone _____ .

PROPERTY OWNER: _____ .Telephone No. _____ .

Mailing Address: _____ .Town _____ State _____ Zip _____ .

PLUMBER: _____ .Telephone No. _____ .

Mailing Address: _____ .Town _____ State _____ Zip _____ .

Email Address: _____ .Contact Person. _____ .

DESCRIPTION / USE OF PROPERTY: - Residential - Duplex/ADU - Multi-family - Commercial / Business.

TYPE OF CONSTRUCTION: - New - Remodel - Addition - Alteration - Reconstruction

DESCRIPTION OF PROJECT: _____ .

SEPTIC SYSTEM: Approval for- **Construction,** **- Operation, - Date Issued:** _____ **Bedrooms.** _____ .

Current Bathrooms. - Full Bath - ¾ Bath. - ½ Bath. **Proposed Bathrooms.** - Full Bath - ¾ Bath. - ½ Bath.

VALUE OF CONSTRUCTION: I hereby certify, under penalty of perjury, that all statements given hereon are truthful and accurate, and that the cost of Construction, alteration, or remodeling is, (*including labor and materials*) = \$ _____ .

BUILDING PERMIT FEE. = VALUE OF CONSTRUCTION X 1 %. = \$ _____ .

APPLICATION FEE. ADD (\$50.00.) TOTAL FEE. = \$ _____ .

I The Applicant hereby agree to comply with the Town of Brentwood’s Building and Zoning Ordinance and all work will be constructed in accordance with the New Hampshire State Building Code, and related Codes as adopted, and in accordance with the plans submitted.

PRINTED NAME OF APPLICANT: _____ .

APPLICANTS SIGNATURE: _____ . Date: _____ .

FOR DEPARTMENT USE ONLY: MASTERS License #. _____ **.Expiration Date.** _____ .

FEE AMOUNT RECEIVED: \$ _____ . - Check #. _____ - Cash - Credit Card.

NAME ON CHECK: _____ .

.BUILDING OFFICIAL: _____ . Date: _____ .

- APPLICATION APPROVED - APPLICATION DENIED - APPLICATION INCOMPLETE.

* NOTE: Dig Safe must be called before any excavation. Permit Fee is due at time of submittal.