

City of Keene PERMIT APPLICATION

Fire Prevention Bureau 32 Vernon Street Keene, New Hampshire 03431 603-357-9865/Fax: 357-9869

Property Information- Where improvements are proposed							
Street #	Unit/Apt #		Street Name		Zoning District		
Owner Information- Who owns the property where the improvements are proposed							
Name:			Address:			Phone #	
City/State:			Zip Code:		H	E-mail:	
Applicant Information- If the applicant is not the owner							
Company Name:			Address:			Phone #	
City/State:		Zip Code:		I	E-mail:		
Name of Contact Person for this Project:			Phor		Phone #	one #	
Application Information- Describe the proposed improvements							
Permit Type:	Oil / Gas Burne Other		Oil / LP Tai	ıks	Fire Detection	<i>Fire Protection</i> # of <i>Units</i> :	
Building Use:	Single-Family	Multi-Family	Commercial	Other		# of <i>Stories</i> :	
Work Type:	New	Addition	Renovation	Move	Partial	Value: \$	
Description of Work: Attach description if needed							
Plumbing and Electrical sub-contractors- Signature indicates responsibility for compliance with laws and codes							
Electrical Contractor- State License Number: Expiration Date:							
Name:			Address:			Phone #	
City/State:			Zip Code:		I	E-mail:	
License Holders S	ignature:				I	Date:	
Plumbing Contractor- State License Number: Expiration Date:							
Name:			Address:			Phone #	
City/State:			Zip Code:		H	E-mail:	
License Holders Signature:					I	Date:	
Design Professional- Responsible Architect or Engineer							
Name:			Address:			Phone #	
City/State:			Zip Code:		I	E-mail:	

I hereby certify that as the applicant for permit, I am the owner of this property , or the owners authorized agent (check one). I hereby declare that the statements and information contained in this application and submitted in conjunction with said application are true and accurate to the best of my knowledge. I understand that I am responsible to ensure that all construction or other work will be completed in accord with all Federal, State and Local laws, code and ordinances, including but not limited to the State Fire and Building Codes NHRSA 155-A. I understand that I am responsible to ensure that all inspections will be completed as required by the City, and no structure will be used in violation of Federal, State and Local laws, code and ordinances. The making of a false statement on this form shall constitute a criminal offense.

Attest:

Signature of Applicant

Date: