

TOWN OF LOUDON
BUILDING DEPARTMENT/CODE ENFORCEMENT
8 COOPER STREET ~ P O BOX 7032 ~ LOUDON, NH 03307
603-798-5584

APPLICATION FOR GAS PERMIT – PLEASE PRINT

This application is made with the full knowledge of the current requirements of the regulations governing such installation, which will be made in compliance with INTERNATIONAL MECHANICAL CODE 2009, NFPA 54 & 58. I further agree, upon accepting this permit, NOT to cover any part of the installation until it is inspected, tested and approved.

PERMIT MUST BE ISSUED PRIOR TO INSTALLATION.

Landowner name: _____ Telephone: _____

Mailing address: _____

Location if different than above: _____

Installation Company: _____

Company address: _____

Company telephone: _____ Company business license # _____

Gas Fitter Master: _____

Gas Fitter Master License # _____ Expiration date: _____

Description/Scope of Work: _____

1. Equipment to be installed: _____ Serial #: _____

2. Equipment to be installed: _____ Serial #: _____

3. Equipment to be installed: _____ Serial #: _____

4. Size of tank(s) to be installed: Aboveground _____ Underground _____

5. Gas pipe size: _____ Gas pipe type: _____

6. Venting system type: _____

INSTALLER'S SIGNATURE: _____ DATE OF APPLICATION: _____

BUILDING OFFICIAL SIGNATURE: _____ DATE: _____

For Office Use:

Fees Received: _____ Date: _____ Permit #: _____