



Plumbing Permit Application

City of Rochester, New Hampshire
 Department of Building, Zoning and Licensing Services
 31 Wakefield St. Rochester, NH
 Telephone: (603) 332-3508
 Fax: (603) 509-1912

Issue Date: _____
 Permit #: _____
 (This area for office use only)

Map # _____
 Lot # _____
 Block # _____
 Zoning _____

Location (Street # & Street Name): _____

Owner: _____ **Address:** _____

City: _____ **State:** ____ **Zip:** _____ **Telephone:** _____

Email _____ **Cell Phone** _____

Contractor: _____ **Address:** _____

City: _____ **State:** ____ **Zip:** _____ **Telephone:** _____

Master's Name: _____ **Cell #:** _____

N.H. Master Plumbing License Number: _____

Email _____

Preferred Contact Method: Telephone Cell Email

Residential Commercial Is this work for a NEW LIVING UNIT? Yes No

FIXTURE	#	FIXTURE	#	FIXTURE	#
Water Distr. Syst.		Dishwasher - Res		Stacks	
Waste System		Garbage Disposal		Sinks	
Water Tank/Heater		Laundry Tray/ Wash Sink		W C / Toilet	
Floor Drains		Washing Machine		Lavatory	
Sewage Ejector		Special Wastes		Showers	
Drinking Fountain		Rainwater Leaders		Urinal	
Pump		Backflow Preventer		Other	
Sill Cocks		Bath Tub		App. Fee	1

Description of Work: _____

Instructions for Permit Applications

1. All information must be printed legibly.
2. Owner name, address and phone number.
3. Location and address of work site.
4. Complete description of work to be done.
5. Number of fixtures, appliances and equipment to be installed.
6. Plans must be submitted on all new buildings and major renovations.

Notes:

The property owner of record may exercise their right to perform their own plumbing work on their residence if he or she lives at the residence and the residence is a Single Family Dwelling occupied by the owner of record

It is the responsibility of all contractors, electricians and plumbers to obtain the necessary permits from the Building, Zoning and Licensing Services office at City Hall before ANY work has begun. Work must begin within six (6) months of the issuance of any permit.

If this is an "After the Fact" permit, it will be subject to a fee two times the normal permit fee.

Plumbers must have a valid license from the State of New Hampshire to obtain a permit. Permits are not transferable.

It is the responsibility of the contractor to obtain all inspections required. A rough-in inspection is required before any work is covered, and a final inspection is required when all work is complete. A forty-eight (48) hour notice is required for any inspection.

This signed application constitutes consent on the applicant's part to allow for all inspections at the property location listed.

No permit will be issued until all of the above information is furnished, and all the above conditions met.

INSPECTIONS REQUIRED: (48 hours notice required)

1. When under slab piping has been installed.
2. When rough-in is complete and visible (Rough).
3. When job is complete, but before occupancy (Final).

The Department of Building, Zoning and Licensing Services approval would certify that the applicant could proceed with installation of plumbing fixtures in accordance with specifications submitted. Any deviation from the specifications submitted will require an amendment to this permit or additional permits.

If you have any questions, feel free to contact the Department of Building, Zoning and Licensing Services office at (603) 332-3508

Statement of Compliance:

I have read and understand the statement and hereby agree to all of the terms stated therein. I agree to abide by any and all codes relating to my field of work, including all national, state and local codes. I also realize that any false statement made in the application for permit may be grounds for revocation of said permit.

40.16 Permits.(a) (4) Fees for building permits shall be waived for a honorably discharged veteran or an active duty, National Guard or reserve member of the United States Armed Forces, who plans to construct or have constructed for himself a home or appurtenance to a home already owned by him for exclusive occupancy by himself and his immediate family.

IF THIS APPLIES, PLEASE CHECK THE BOX. (VERIFICATION MAY BE REQUIRED)

Applicant Signature

Date

Cost of Construction: _____ **Permit Fee:** _____

Permit fee is based on \$9.00 per \$1,000.00 of Construction Cost (Rounded Up Nearest \$1,000.00) plus a \$10.00 application fee

Minimum Permit Fee is \$20.00

~~~~~ (DO NOT WRITE IN THIS SPACE) ~~~~~

|                                                         |  |                                        |  |
|---------------------------------------------------------|--|----------------------------------------|--|
| <b>Paid:</b> <input type="checkbox"/> Cash \$ _____     |  | <input type="checkbox"/> Check # _____ |  |
| Approved By                                             |  | Date: _____                            |  |
| Dept. of Building, Zoning and Licensing Services: _____ |  |                                        |  |