



TOWN OF RAYMOND

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

Tel: (603) 895-4735
 Fax: (603) 895-0903
<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.

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: _____