

## TOWN OF BRENTWOOD ELECTRICAL PERMIT

Site Location (street a	ddress):						
Owner Name:			Phone:				
Owner Address;							
Contractor:							
Contractor Address:						[	
Contractor Phone #:							
NH License:		(Please pr	oduce your licens	se to be phot	ostated)		
□ Residential	☐ Commercial	☐ Indust	trial	□ Other			
	□ New Construction	ı	☐ Alteration / Repair				
□ Service:	Amps	Voltage		_Phase	Overhead Underground		
Work to be Done: Ceiling Fixtures:			Switches:	-		T 00	
Receptacles / Outlets:			Circuits:				
Furnaces / Heaters:			Water Heater:				
Signs:	Ranges:			Other:		ļ	
Describe Work to be	Done:						
	Estimated Cost: \$						
Note: A check mad fee is \$ 50 + 1.50 per applicant.	e payable to the "Towr box with a \$140 max. A	ı of Brentwood ny balance du	d" must be subr e must be paid p	mited with to	the application. Appermit being releas	oplication sed to the	
For Inspection call 64	2-6400-ext 18	kkaiser@b	rentwoodnh.gov				
The Applicant certifies in performing the work	that all information given for which this permit is is:	is correct and the	hat all pertinent o	rdinances ar	nd codes will be com	plied with	
	Contractor	Signature					
Permit Approved:Buildi		pector					
Date: Permit #			_	· ·	Selectmen		