



# TOWN OF BRENTWOOD PLUMBING PERMIT

Site Location (street address): \_\_\_\_\_

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Contractor: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Contractor Phone #: \_\_\_\_\_

NH License: \_\_\_\_\_ (Please produce your license to be photostated)

- Residential     
  Commercial     
  Industrial     
  Other \_\_\_\_\_  
 New Construction     
  Alteration / Repair

**Work to be Done:**

Sinks: \_\_\_\_\_ Floor Drains: \_\_\_\_\_ Urinals: \_\_\_\_\_  
 Baths: \_\_\_\_\_ Sewage Ejector: \_\_\_\_\_ Dishwashers: \_\_\_\_\_  
 Lavatories: \_\_\_\_\_ Toilets \_\_\_\_\_ Disposals: \_\_\_\_\_  
 Tank & Heater: \_\_\_\_\_ Showers: \_\_\_\_\_ Washing Machines: \_\_\_\_\_ Other: \_\_\_\_\_

**Describe Work to be Done:**

\_\_\_\_\_

Estimated Cost: \$ \_\_\_\_\_

**Note:** A check made payable to the "Town of Brentwood" must be submitted with the application. Application fee is \$50 +\$10 per fixture- max \$140. Any balance due must be paid prior to the permit being released to the applicant.

For inspection call 642-6400 ext. 18 Email [kkaiser@brentwoodnh.gov](mailto:kkaiser@brentwoodnh.gov)

The Applicant certifies that all information given is correct and that all pertinent ordinances and codes will be complied with in performing the work for which this permit is issued.

Tax Map \_\_\_\_\_ Lot \_\_\_\_\_ Fee \_\_\_\_\_

\_\_\_\_\_  
Contractor Signature

Permit Approved: \_\_\_\_\_

\_\_\_\_\_  
Building Inspector

Date: \_\_\_\_\_ Permit # \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Selectmen