

Town Of Deep River
 Plumbing, Electrical, Mechanical Permit Application

Date _____
 Permit # ____ - ____

Location of Building	Address _____ <small>(Number) (Street)</small>	
	Subdivision _____ Lot _____ Lot Size _____ <small>(If Applicable)</small>	
	For Office Use: Map # _____ Lot # _____	

Applicant	Name _____		
	Mailing Address _____		
	City _____	State _____	Zip _____
	Day Ph () _____	Fax () _____	

Owner	Name _____		
	Mailing Address _____		
	City _____	State _____	Zip _____
	Day Ph () _____	Fax () _____	

Contractor Information				
Business Name _____			Address _____	
City _____	State _____	Zip _____	Telephone (Include Area Code) _____	
Builders License Number _____			Expiration Date _____	
You must attach a copy of current "Contractor's License" and current "Proof of Liability Insurance".				

<input type="checkbox"/> PLUMBING
Describe Job:

<input type="checkbox"/> ELECTRICAL
Describe Job:

<input type="checkbox"/> MECHANICAL
Describe Job:

FEES	
Total Cost	_____
First \$1000.00 x \$25.26	\$ 25.26
Each addl. \$1000.00 x \$15.26	\$ _____
Total Building Fees	\$ _____
Additional fees may apply if this application requires Zoning approval (Zoning approval is required when said project alters the original footprint of the property)	

PAYMENT
Total Paid _____
Date _____
Building _____
Zoning _____
State _____
Check # _____
Cash _____

Signature of contractor or his representative making application.

Signature of Building Inspector
