

**TOWN OF FRANCESTOWN  
BUILDING/CODE ENFORCEMENT**

<b>PERMIT #</b>
<hr/>
<b>TOTAL FEE</b>
<hr/>

27 MAIN STREET • P.O. BOX 5  
FRANCESTOWN, NEW HAMPSHIRE 03043-0005  
TELEPHONE (603) 547-3469    EMAIL townoffices@francestownnh.org    FAX (603) 547-2622

**Mechanical Permit Application**

Date: \_\_\_\_\_

Name of Owner(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Cell/Alt. No: \_\_\_\_\_

Property Location/Address: \_\_\_\_\_ Tax Map/Lot: \_\_\_\_\_

Name of Contractor: \_\_\_\_\_

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

Contractor's License No: \_\_\_\_\_

Telephone No: \_\_\_\_\_ Cell/Alt. No: \_\_\_\_\_

**Describe work to be performed**

\_\_\_\_\_  
\_\_\_\_\_

Is this permit in conjunction with a building permit?     Yes     No

Work to be completed:     New     Alteration     Replace     Addition

Check all that apply and specify number of units:

- |                       |                                 |
|-----------------------|---------------------------------|
| Air Conditioning Unit | Conversion Burner               |
| Refrigeration Unit    | Fuel Tank                       |
| Forced Air Furnace    | Boiler                          |
| Floor Furnace         | Propane Tank (Gas Company only) |
| Wall Heater           | Gas Piping                      |
| Water Heater          | Fireplace                       |
| Woodstove/Chimney     | Pellet Stove                    |
| Other                 | Generator                       |

Contractor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Building/Code Official: \_\_\_\_\_

Approval Date: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_