



TOWN OF STRATHAM

INCORPORATED 1716

10 BUNKER HILL AVENUE • STRATHAM NH 03885

VOICE (603) 772-7391 • FAX (603) 775-0517 • www.strathamnh.gov

HVAC/MECHANICAL PERMIT APPLICATION

HVAC PERMIT # 2016-_____ MAP# _____ LOT# _____ - _____ ZONE _____

Location or Street Address (Stratham) _____

Owner Information (please print)

First Name _____ Last Name _____ Phone # _____ Email address _____

Mailing Address _____ City/Town _____ State & Zip _____

Contractor Information (please print)

Business Name _____

First Name _____ Last Name _____ Phone # _____ Email address _____

Mailing Address _____ City/Town _____ State & Zip _____

HVAC Permit Fee (please transfer amount from worksheet on reverse/page #2) _____ Check # _____

Permit Fee \$ _____ Construction cost \$ _____

Applicant Signature _____ Date _____

Certification: I hereby certify that I am the owner of record of the named property, or that the proposed work is by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code authorized representative shall have the authority to enter areas covered by such permit at reasonable hour to enforce the provisions of the code(s) applicable to such permit. I certify that the information given is true and correct to the best of my knowledge. No changes from the above information will be made without approval of the building inspector. Construction activities shall not commence until the permit is issued. I acknowledge that all construction will be done in accordance with local town and state ordinances and building regulations and that compliance is the sole responsibility of the applicant. I realize that when all necessary approvals have been acquired, a permit may be granted by the building inspector to allow construction or change in land use in conformance with this application and those plans/specifications submitted in support thereof. I further acknowledge that the proposed structure or improvements shall not occupy or otherwise utilized without the issuance of a certificate of occupancy by the building inspector.

(Initial that I have read the above) _____

Approved for construction:

Building Inspector _____ Date ____ / ____ / 2016

Conditions of this HVAC/Mechanical permit:

~ Continue to reverse/page 2 ~

Project Information (Checkmark all that apply):

RESIDENTIAL: New Single Family Dwelling____ New Duplex Dwelling____ Accessory Apartment____
Addition____ Renovation/Alteration____ Garage/Barn/Outbuilding____

COMMERCIAL: New Building____ Tenant Fit-Out____ Addition____ Garage/Outbuilding____
Renovation/Alteration____

Vent Free Appliances require an inspection request submitted to the Stratham Fire Chief

Description of work

This application is made with the full knowledge of the current requirements of the regulations governing such installation, which will be made in compliance therewith. NH Fire Code, NFPA 54, NFPA 58, AND ALL OTHER APPLICABLE REGULATIONS.

PERMIT FEE CALCULATION:

Residential Projects:

Size of Work Area:

Total Square Feet of Work Area = _____ x

Multiply by .005 per square foot = \$ _____ +

Add flat fee \$ 30.00 =

Total Permit fee . . . \$ _____ (write this amount on front of application by signature)

Commercial Projects:

Size of Work Area:

Total Square Feet of Work Area = _____ x

Multiply by .05 per square foot = \$ _____ +

Add flat fee \$ 300.00 =

Total Permit fee . . . \$ _____ (write this amount on front of application by signature)