



TOWN OF AMHERST FIRE RESCUE

P.O. Box 1199, 177 Amherst Street
Amherst, NH 03031
Phone (603) 673-1545 x202 Fax (603) 672-3927

Fire Prevention Permit

Permit Type: _____

(For Official Use Only)

The undersigned hereby applies for a permit and complete work in compliance with applicable State Fire Codes and NFPA Standards as adopted by the state and the Town of Amherst.

FOR CODE COMPLIANCE, FIRE DEPARTMENT MUST BE CALLED FOR INSPECTIONS.

Address _____ Lot # _____

Type of Occupancy: _____ New Construction: Yes No

Owner's Name _____ Owner's Telephone: _____

Owner's Address _____
Street town state zip

Occupant's Name: _____ Occupant's Telephone: _____

Description of Work: _____

Container Location: N/A Above Ground Below Ground Gallon Capacity: _____

SN: _____ Year of Manufacture: _____ New Old

Name of Contractor: _____ Telephone: _____

Contractor Address: _____
Street town state zip

License #: _____ Expiration Date: _____

Date

Signature of Owner or Installer

Additional Information: _____

When signed below by the Fire Inspector or his designee, this application may be used as a PERMIT authorizing the work and/or installation based on approved plans.

Permit No. _____ Signature of Fire Inspector: _____

Rev. 3-23-15

The project described above has been completed, inspected and found to be in compliance with local and State Fire Code as adopted by the State Fire Marshal.

Date

Signature of Inspector