



TOWN OF AMHERST FIRE RESCUE

P.O. Box 1199, 177 Amherst Street
Amherst, NH 03031

Phone (603) 673-1545 x202 Fax (603) 672-3927

Life Safety / Mechanical Permit

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

FIRE RESCUE MUST BE CALLED FOR ALL 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: _____

Projected Start Date/ Work Scheduled for: _____

Date Signature of Owner or Installer

Additional Information: _____

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

Office Use Only

Signature of Inspector: _____ Date: _____

Fees: Fuel Piping _____	Fuel Burners _____	Storage Tank _____	Alarms _____	Inspec Svcs _____
Total _____	Paid _____	Pd Date _____	[Cash Check]	