

TOWN OF LONDONDERRY, NH
603-432-1100 X.115

PLUMBING PERMIT

Date: _____
Work Location: _____
Owner: _____

Work Is For: Residential ____ Commercial ____
Please circle one:
New Construction Addition* Remodel*
*Please Specify: _____
Total Number of Fixtures: _____

Number of bathroom groups: _____ Full _____ 3/4 _____ 1/2

Contractor's License Number: _____
Contractor's Name & Company: _____
Address: _____
 No. Street City State Zip
Phone No: _____
Email: _____

Signature of Contractor or Authorized
Representative Making Application

Signature of Permit Clerk

FEE \$ _____

Permit No: _____

Check, Cash or Credit/Debit, paid at the Town Clerk's office (first floor).
Checks payable to Town of Londonderry