



City of Keene, NH

Permit Application

If you have questions on completing this form, please call (603) 352-5440 or email

For Office Use Only:

Permit # _____
Rec'd By _____
Zoning _____
Floodplain _____
Fee _____

SECTION 1: PROPERTY INFORMATION

PROPERTY ADDRESS:

UNIT/APT#:

SECTION 2: CONTACT INFORMATION

OWNER	PRINTED NAME:	APPLICANT	PRINTED NAME:
	COMPANY:		COMPANY:
	MAILING ADDRESS:		MAILING ADDRESS:
	PHONE:		PHONE:
	EMAIL:		EMAIL:

ELECTRICIAN	COMPANY:		
	MAILING ADDRESS:		
	PHONE:	LICENSE #:	EXPIRATION DATE:
	EMAIL:		
	PRINTED NAME:	SIGNATURE:	DATE:

PLUMBER	COMPANY:		
	MAILING ADDRESS:		
	PHONE:	LICENSE #:	EXPIRATION DATE:
	EMAIL:		
	PRINTED NAME:	SIGNATURE:	DATE:

ARCHITECT/ ENGINEER	COMPANY:		
	MAILING ADDRESS:		
	PHONE:		
	EMAIL:		

SECTION 3: DESCRIBE PROPOSED IMPROVEMENTS Check all that apply

Permit Type:	Building	Electrical	Plumbing	Change of Use	Other _____
Building Use:	Single Family	Multi Family	Commercial	Other _____	# of Units _____ Stores _____
Work Type:	New	Addition	Renovation	Move	Partial Value: _____

Description of Work:
(Attach additional sheets if needed)

I hereby certify that as the applicant, I am the owner of this property, or the owners authorized agent. I hereby declare that the statements and information contained in this application and submitted in conjunction with said application are true and accurate to the best of my knowledge. I understand that I am responsible to ensure that all construction or other work will be completed in accord with all Federal, State and Local laws, codes and ordinances, including but not limited to the State Building Code NHRSA 155 A. I understand that I am responsible to ensure that all inspections will be completed as required by the City, and no structure will be used in violation of Federal, State and Local laws, codes and ordinances. The making of a false statement on this form shall constitute a criminal offense.

SIGNATURE:	PRINT NAME:	DATE:
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