

The City of Berlin Code Enforcement Michel Salek, Building Inspector 168 Main Street, Berlin, NH 03570

603-752-1630 Fax: 603-752-2620

Permit No.	
Date	

APPLICATION FOR MECHANICAL PERMIT

1. Name of Applicant:	Name of Applicant: Location of Building:						
2. Address:Telephone:							
Email Address:		Cell Phone:					
3. Class of work: New Building: Add Other:				Moving			
4. Type of Occupancy:							
	6. Size of Structure or addition						
7. Number of stories	8. Height:						
Applications must include shop drawings, ar	nd any applicable Prints v	vhich may better des	cribe the installation.				
Installation Description:							
Materials to be Installed:							
8. Estimated Cost:							
SCOPE OF WORK DESCRIPTION: (S	tate clearly here all par	iculars)					
Contractor Name:		T	elephone:				
Address:							
I hereby acknowledge that I have read this inspections by the technical inspectors up installations will be in accordance with the Berlin and the Slate of New Hampshire.	on notification and at rea	sonable times. That	the construction and	d			
Signature of Owner:			Date:				
Approved by:	Fire Pre	vention Bureau Or	n:				
Permit approved by	B	uilding Inspector (On:				