



TOWN OF WAKEFIELD, NEW HAMPSHIRE

2 HIGH STREET, SANBORNVILLE, NEW HAMPSHIRE 03872

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OFFICE OF THE BUILDING INSPECTOR &  
CODE ENFORCEMENT OFFICE

APPLICATION FOR CERTIFICATE OF OCCUPANCY

Name of Owner \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

Address of Property \_\_\_\_\_

Applicants Name \_\_\_\_\_ Phone # \_\_\_\_\_

BUILDING PERMIT # \_\_\_\_\_ MAP \_\_\_\_\_ LOT \_\_\_\_\_

Type of Construction and use of occupancy (please check one of the below)

( ) Wood Frame, Single Family Residential ( ) Commercial ( ) Other \_\_\_\_\_

**SIGNATURES OF THE FOLLOWING ARE REQUIRED BEFORE A CERTIFICATE OF OCCUPANCY CAN BE ISSUED.**

**I certify that I have done all the work in my area of responsibility in accordance with all applicable codes.**

General Contractor \_\_\_\_\_ Date \_\_\_\_\_

Builder \_\_\_\_\_ Date \_\_\_\_\_

Septic Installer \_\_\_\_\_ Date \_\_\_\_\_

Well Installer \_\_\_\_\_ Date \_\_\_\_\_

Foundation Contractor \_\_\_\_\_ Date \_\_\_\_\_

Masonry/Chimney \_\_\_\_\_ Date \_\_\_\_\_

Insulation Contractor \_\_\_\_\_ Date \_\_\_\_\_

Electrician \_\_\_\_\_ Lic # \_\_\_\_\_ Date \_\_\_\_\_

Plumber \_\_\_\_\_ Lic # \_\_\_\_\_ Date \_\_\_\_\_

Heating \_\_\_\_\_ Date \_\_\_\_\_

Gas \_\_\_\_\_ Date \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_