



**TOWN OF WAKEFIELD, NEW HAMPSHIRE
CODE ENFORCEMENT OFFICE**

2 HIGH STREET
SANBORNVILLE, NEW HAMPSHIRE 03872
TELEPHONE (603) 522-6205 x 308 FAX (603) 522-2295
EMAIL: CODEASST@WAKEFIELDNH.COM

PLUMBING PERMIT

OWNER _____ PHONE # _____
ADDRESS _____
ADDRESS OF INSTALLATION _____
NAME OF INSTALLER _____ PHONE # _____
BUSINESS NAME _____ LICENSE # _____
BUILDING PERMIT # _____ MAP # _____ LOT # _____

DESCRIPTION OF WORK TO BE PERFORMED:

- ☐ SINGLE FAMILY ☐ MODULAR ☐ MULTI FAMILY ☐ OTHER
☐ NEW WORK
☐ RENOVATION / RELOCATION OF EXISTING PLUMBING
☐ REPLACEMENT OF EXISTING MECHANICAL APPLIANCE
☐ HOOK – UP TO PRIVATE SEPTIC SYSTEM
☐ HOOK – UP TO PUBLIC SEWAGE SYSTEM
☐ OTHER _____

**ALL WORK IS TO BE IN COMPLIANCE WITH THE INTERNATIONAL
PLUMBING CODE AS ADOPTED BY THE STATE OF N.H.**

ESTIMATED COST OF PROPOSED WORK \$ _____
SIGNATURE OF INSTALLER _____
N.H. MASTERS LICENSE # _____ EXPIRATION DATE _____

**Please bring a current photo I.D. and your N.H. state
plumbing license to the office before work begins.**