

**TOWN OF MADISON
P.O. BOX 248
MADISON, NH 03849**

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code@madison-nh.org

BOB BOYD
CODE ENFORCEMENT OFFICER

PLUMBING PERMIT

TOWN OF MADISON PLUMBING PERMIT # _____

Application Date: _____

FEE: \$30.00 (Cash/Check) Made payable to **TOWN OF MADISON**

PROPERTY OWNER _____ PHONE # _____

PROPERTY OWNER'S MAILING ADDRESS _____

INSTALLER _____ PHONE # _____

INSTALLER ADDRESS _____

LOCATION OF JOB _____

MAP _____ **LOT** _____

This application is made with full knowledge of the current requirements of the regulation governing such installation, which will be made in compliance therewith, I further agree, upon accepting this permit, not to cover any part of the installation until it is inspected and approved.

INSTALLER SIGNATURE: _____

NH LICENSE# _____ EXPIRATION: _____

JOB DESCRIPTION _____

DATE PERMIT ISSUED _____ EXPIRES _____

CODE ENFORCEMENT OFFICER SIGNATURE _____

Property Owner/Contractor Initials = _____