

## Town of Alton Electrical Permit

Building Department PO Box 659 1 Monument Square Alton, NH 03809 Phone 603-875-2164 Fax 603-651-0732

TAX MAP #

				LOT#
PERMIT <u>#</u>	-			FEE \$
The undersigned hereby applies for a permit to do electrical work as described below. (Plans to be submitted if required by the Building Official.) All electrical work to be completed in accordance with the National Electrical Code and State of New Hampshire Regulations				
PROPERTY OWNER: PROPERTY ADDRESS:				_
INSTALLER:	LICEN	SE#	PHONE #	_
COMPANY NAME:		PHONE #		_
TYPE OF BUILDING: Residential Commercial Other:				
NATURE OF WORK: New Alterations Repair & Replacement Other: Generator - Number of KW				
IS THIS WORK CREATING ANY ADDITION LIVING UNITS OR ADDITIONAL USES? $\ \square$ YES $\ \square$ NO				
SERVICE SIZE:	[	☐ New ☐ Existir	ng 🗌 Upgrade	
DESCRIPTION OF W	ORK:			_
Signature of Applicant or Electrician:Date:				-
Signature of Building Official:			Date:	

Contact 603-875-2164 to schedule inspections
A minimum of 48-hour notice is required when scheduling.