



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 # _____

FEE \$ _____

PERMIT # _____

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

OWNER: _____ LOCATION: _____

CONTRACTOR: _____ LICENSE # _____ PHONE # _____

TYPE OF BUILDING: Residential Commercial Other:

NATURE OF WORK: New Alterations Repair & Replacement Other:

IS THIS WORK CREATING ANY ADDITION LIVING UNITS OR ADDITIONAL USES? YES NO

SERVICE SIZE: _____ New Existing Upgrade

DESCRIPTION OF WORK: _____

Signature of Applicant or Agent: _____ Date: _____

Signature of Building Official: _____ Date: _____

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