



Rindge Building Department
 30 Payson Hill Rd, PO Box 163
 Rindge NH 03461
 Phone: 603-899-5181 Ex 109
 Fax: 603-899-2101
 buildingdept@town.rindge.nh.us

Map # _____
 Lot # _____
 Zoning: _____
 Date: _____

MECHANICAL PERMIT APPLICATION

Location (Street # & Street Name): _____

Owner: _____ Address: _____

City: _____ State: ___ Zip: _____ Telephone: _____

Email _____ Cell Phone _____

Contractor: _____ Address: _____

City: _____ State: ___ Zip: _____ Telephone: _____

Master's Name: _____ Cell #: _____

N.H. Gas Fitters License Number: _____

Email _____

Preferred Contact Method: Telephone Cell Email

Residential Commercial New Appliance Replacement Appliance

Heating HVAC Ventilation Duct Work

Fuel Storage Tank: Aboveground Underground Tank Only

New Chimney Replacement Chimney Number of Flues: _____

Chimney Construction Type: _____

APPLIANCE	#	FUEL TYPE	#	GAS PIPE TYPE	#
Boiler		LPG		Black Iron	
Furnace		Oil		Copper	
Water Tank/Heater		Wood		CSST (See Note)	
Dryer		Pellet			
Range		Coal			
Generator					
Fireplace					
Woodstove or Other					

CSST Brand: _____ *Requires current Manufactures Certification Card

*Gas piping requires current NH Gas Fitters License

Inspection of gas piping is required after all pipe is in place and pressurized (air) to 3-5 PSI with gauge.

Make of Appliance #1: _____ Appliance SS #: _____
Appliance Size: _____ BTU's (If applicable) Existing: _____ Proposed: _____
Location of Appliance: _____

Make of Appliance #2: _____ Appliance SS #: _____
Appliance Size: _____ BTU's (If applicable) Existing: _____ Proposed: _____
Location of Appliance: _____

Make of Appliance #3: _____ Appliance SS #: _____
Appliance Size: _____ BTU's (If applicable) Existing: _____ Proposed: _____
Location of Appliance: _____

Description of Work:

Attach Diagram If Applicable.

NH State Fire Code NFPA 54, National Fuel Gas Code – 5.1 Piping Plan

5.1.1 Installation of Piping System – Where required by the authority having jurisdiction, a piping sketch or plan shall be prepared before proceeding with the installation. This plan shall show the proposed location of piping, the size of different branches, the various load demands, and the location of the point of delivery.

5.1.2 Addition to Existing Systems

5.1.2.1 When additional appliances are being connected to a gas piping system, the existing piping shall be checked to determine whether it has adequate capacity.

5.1.2.2 If inadequate, the existing system shall be enlarged as required, or separate gas piping of adequate capacity shall be provided.

The following methods can be used while mapping piping systems.

- The Longest Length Method
- The Branch Length Method
- Hybrid Pressure Method
- Pressure Drop per 100 ft Method

Applicant Signature

Date

Requirements for Permit Applications

1. All information must be printed legibly.
2. Owner name, address and phone number.
3. Location and address of work site.
4. Complete description of work to be done.
5. Number of fixtures, appliances and equipment to be installed.
6. Plans must be submitted on all new buildings and major renovations.

Notes:

It is the responsibility of all contractors, electricians and plumbers to obtain the necessary permits from the Rindge Building Office at Town Office before any work has begun. Work must begin within six (6) months of the issuance of any permit.

If this is an "After the Fact" permit, it will be subject to a fee described in the Official Building / Fire Fee Schedule.

Contractors must have a valid license from the State of New Hampshire to obtain a permit. Permits are not transferable.

It is the responsibility of the contractor to obtain all inspections required. A rough-in inspection is required before any work is covered, and a final inspection is required when all work is complete. A twenty-four (24) hour notice is required for any inspection. This signed application constitutes consent on the applicant's part to allow for all inspections at the property location listed.

No permit will be issued until all of the above information is furnished, and all the above conditions met.

If you have any questions, feel free to contact the Building Department Office at (603) 899-5181 Ex 109.

Statement of compliance:

I have read and understand the statement and hereby agree to all of the terms stated therein. I agree to abide by any and all codes relating to my field of work, including all national, state and local codes. I also realize that any false statement made in the application for permit may be grounds for revocation of said permit.

Rindge Building Department Approval certifies that the applicant may proceed with certain building improvements in accordance with the specifications submitted. Any deviation from the specifications submitted will require an amendment to this permit or additional permits.

***** When Applicable – Plans must be submitted to Rindge Building Department for Approval*****

Applicant Signature Date

Cost of Construction: _____ **Permit Fee:** _____

Paid: Cash \$ _____ Check # _____

Permit fee is based on the Official Building / Fire Department Fee Schedule
Minimum Permit Fee is \$25 for Residential and \$50 for Commercial

~~~~~(DO NOT WRITE IN THIS SPACE)~~~~~

Approved By \_\_\_\_\_ Date: \_\_\_\_\_  
Building Inspector: \_\_\_\_\_