

*TOWN OF WOLFEBORO*  
**PLUMBING PERMIT APPLICATION**  
CODE ENFORCEMENT 569-5970      [codes@wolfeboroh.us](mailto:codes@wolfeboroh.us)

Permit Fee: \$ 50.00      Permit Number \_\_\_\_\_ Date Received Stamp: \_\_\_\_\_

**Property Information:**      Tax Map # \_\_\_\_\_

Physical Location of project: \_\_\_\_\_  
Street name & number (or description)

**Owner Information:**      Email: \_\_\_\_\_ @ \_\_\_\_\_

Name \_\_\_\_\_ Telephone #: \_\_\_\_\_

Legal Mailing Address \_\_\_\_\_  
Street or PO Box      Town/City      State      Zip

Signature of Owner \_\_\_\_\_ Date: \_\_\_\_\_ 20\_\_\_\_

**Installer Information:**

Signature of Installer \_\_\_\_\_ Date: \_\_\_\_\_ 20\_\_\_\_

Print Name \_\_\_\_\_ Telephone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street or PO Box      Town/City      State      Zip

LICENSE# \_\_\_\_\_ EXP DATE: \_\_\_\_\_

*This application is made with the full knowledge of the current requirements of the regulations governing such installation, which will be made in compliance therewith. 2018 INTERNATIONAL PLUMBING CODE, AND ALL OTHER APPLICABLE REGULATIONS. NOT to cover any part of the installation until it is inspected, tested and approved. PERMIT MUST BE ISSUED PRIOR TO INSTALLATION*

**Description/Scope of Work:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Approval:**

\_\_\_\_\_  
Building Official      Date of Approval

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PROJECTS ON TOWN WATER MUST BE ***INSPECTED BY PUBLIC WORKS*** prior to the Certificate of occupancy is issued. All new or repaired plumbing must have a double check valve backflow preventer equal to a Watts No. 7 installed. RETURN ATTACHED ***CERTIFICATE OF PLUMBING TEST*** TO BUILDING OFFICE AT CONCLUSION OF JOB.