

Town of Lyndeborough Office of the Building Inspector

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Fax: (603) 654-5777 Application for Mechanical Permit #_____ **Property Information** Map-Lot-Sublot #_____ Property Location _____ Property Owner's Name_____Owner Phone ____ Property Owner's Mailing Address (if different than above) Purpose of Building **Contractor Information** _____ Company _____ Contractor's Name Contractor's Phone _____ Co. Phone _____ License #_____Exp. Date _____ Contractor's Address Contractor's Signature X Date By signing above, the individual applies for a permit to perform the mechanical work as described below: ☐ Residential ☐ Commercial ☐ Industrial ☐ New Work ☐ Alteration ☐ Replacement □ Addition *Check all that apply:* ☐ Air Conditioning Unit ☐ Refrigeration Unit ☐ Conversion Burner ☐ Forced Air Furnace ☐ Fireplace ☐ Wall Heater ☐ Boiler ☐ Water Heater ☐ Pellet/Wood Stove ☐ Fuel Tank ☐ Cook Stove ☐ Generator ☐ LP Gas Piping ☐ Propane Tank □ Other ____ Description of Work ____ Permit must be obtained before work is started. Inspector must be notified when ready for any inspection. OFFICE USE ONLY Date Approved Permit Fee Paid Paid OR . Signature _____ ☐ Building Inspector ☐ Designee Inspection Notes