



Office: 147 West Main Street - Suite 103, Hillsborough, NH 03244
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APPLICATION FOR WATER HOOKUP PERMIT

Address of Property: _____

Tax Map No: _____ Lot No: _____

Name of Owner of Record:

Current Address of Owner or Record:

Telephone/Email/Fax of Owner:

Designated Representative if Other Than Owner:

Name: _____

Contact Address and Telephone:

Capacity:

Lot Sketch Attached: Yes: ___ No: ___

Fee Submitted (\$10,000.00): Yes: ___ No: ___

Date Application Submitted: _____ Initials: _____

Connection details and description including material: (and/or attach separate sheet and/or plans):

PERMIT APPROVAL

Date of site visit and attendees:

Permit is Denied: _____ Approved: _____ Approved subject to the following additional conditions:

Date Issued: _____
(Permit is valid for up to 60 days and is nontransferable)

Bond Required: No: ___ Yes: ___ Amount: _____

Permit No: _____
(Year eg 2014- XX (followed by sequential number))

Name: _____
Title: _____

Name: _____
Title: _____

Name: _____
Title: _____