## **New Hampton Fire Department**

26 Intervale Drive, New Hampton, NH 03256 Phone: (603) 744-2735 Fax: (603) 744-6520

## Permit to Install and Operate Oil Burning Equipment

To the Chief of the Department:

The undersigned hereby applies for a permit to install and operate oil burning equipment in compliance with R.S.A. 153:5 and all applicable codes and ordinances which apply to the installation.

Owner Name:	Owner Telephone:				
Owner Address (if different):					
Type of Occupancy:	Stories:				
	Business:				
	Emergency Contact Telephone:				
Installer License #:					
	Serial Number:				
Size and Location of Fuel Container:					
** Please return this f	form with a copy of the installer license**				
	amiliarize the occupant/owner with the operating, safety, and periodic maintenand viding a copy of the manufacturer's installation and operation instructions.	ce			
Signature of Owner/Installer	Date				
When signed below by the Chief of the Fire Department, this application may be used as a <u>temporary permit</u> authorizing the installation of oil burning equipment.					
Signature of Fire Chief or Designee	Date				
, -	rning equipment described above which has been inspected and found to be in nf-C 6012.3) as adopted by the State of New Hampshire Fire Marshal.				
Signature of Fire Chief or Designee	Date				

Submit in person, by fax, or by emailing to: inspections@new-hampton.nh.us

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