

Office Use Only
(DSFM 106 rev 6/2019)
Date Rcv: _____
Rcv By: _____
Amount: _____
CK #: _____
Rev: _____
Permit #: _____

STATE OF NEW HAMPSHIRE DEPARTMENT OF SAFETY

Robert L. Quinn

Division of Fire Safety

Office of the State Fire Marshal

Paul J. Parisi, State Fire Marshal

Mailing Address: 33 Hazen Drive Concord NH 03305

603-223-4289, Fax 603-223-4294

TDD Access: Relay NH 1-800-735-2964 Arson Hotline 1-800-400-3526



STATE BUILDING PERMIT APPLICATION

Submit a separate application per permit

APPLICATION

Applicant Information (Property Owner)

Property Information

Name: _____

Building Name: _____

Title: _____

Map/Lot#: _____

Address: _____

Address: _____

City: _____ State : _____ Zip: _____

City: _____ State: _____ Zip: _____

Email: _____

Telephone #: _____

APPLICATION INFORMATION

Permit Type (Check One):

- Building Construction Mechanical (Fuel Gas/Equipment)
 Fire Protection Mechanical (Non-Fuel gas portion of work)
 Electrical Plumbing

Construction Type:

- New Construction
 Addition
 Renovation

IBC Use Group: _____ Building Area: _____ SF

CONTRACTOR INFORMATION

General Contractor Name: _____ Email: _____

Company Name: _____ Telephone #: _____

Address: _____

City: _____ State: _____ Zip: _____

LICENSING INFORMATION

Please provide a copy of applicable license for electrical, plumbing or mechanical applications

- Electrical Fire Protection Mechanical (Fuel Gas) Plumbing

NH License #: _____ Exp. Date: _____ Email: _____

Name: _____ Telephone #: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

RESPONSIBLE DESIGN PROFESSIONAL (IF APPLICABLE)

Name: _____ NH License # & Exp. Date: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Brief Description:

Owner's Signature _____ Date: _____

I hereby certify, subject to the penalties of unsworn falsification pursuant to RSA 641:3, that all statements made on this application are true to the best of my knowledge and that I am responsible to ensure that all construction work will be completed in accordance with all Federal, State and local laws and ordinances, including local Zoning Ordinances as applicable and the State of NH Building Code, and that I further authorize employees and or agents of the NH Fire Marshal's Office to enter this property for purposes of inspections.

PERMIT FEES PURSUANT TO NH CODE OF ADMINISTRATIVE RULES Saf-C 8105

***Please make checks payable to "Treasurer, State of New Hampshire"**

Calculations: (Electrical/Mechanical/Plumbing)

Total cost of construction for permit calculation :\$ _____ (electrical/mechanical/plumbing only)

JOB COST	AMOUNT	MULTIPLY	INSP. FEE (MIN \$75.00)
1st 100,000 0.01-100,000		1.2%	
Cost 100,000.01-300,000	+	0.5%	+
Costs 300,000.01 +	+	0.3%	+
Total:	=	Total Fee:	=

Re-Inspection Fee (Electrical/Mechanical /Plumbing)

10% Re-inspection Fee: 10% of the fee calculated, provided that the fee shall not be less than \$100.00 nor more than \$500.00.

New Commercial Permit Fee (Building)

FEE TYPE	SQUARE FOOTAGE	FEE AMOUNT	TOTAL INSP. FEE
BUILDING PERMIT		0.30	
OTHER STRUCTURES min. \$35.00		1.00	

New Commercial Renovation Permit Fee (Building)

FEE TYPE	SQUARE FOOTAGE	FEE AMOUNT	TOTAL INSP. FEE
BUILDING PERMIT		0.15	
OTHER STRUCTURES min. \$35.00		\$1.00	

New Commercial Permit & Renovation Permit Fee (Fire Protection)

FEE TYPE	# OF DEVICES	FEE AMOUNT EACH	TOTAL INSP. FEE MIN \$35.00
FIRE PROTECTION		1.00	

Re-Inspection fee for Building, Fire Protection and Other; Permit fee is \$100.00 per inspection