



Town of Hopkinton

330 Main Street • Hopkinton, New Hampshire 03229 • www.hopkinton-nh.gov
 Tel: 603-746-3170 Fax: 603-746-3049

MECHANICAL PERMIT APPLICATION

Street Address:		Work Type:		
<input type="checkbox"/> Residential		<input type="checkbox"/> Commercial		<input type="checkbox"/> Industrial
<input type="checkbox"/> Other _____				
Business Name:		Property Owner's Name:		
Mailing Address:		Mailing Address:		
City/State/Zip:		City/State/Zip:		
Phone (days):		Phone (days):		
Email:		Email:		
Gas License #				
Contractor's Signature:				
Print Name:				
Work Type		Fee	Items	Total
Gas Piping		35.00	-	
Gas Appliances, each		10.00		
Heating Equipment (includes ductwork and piping) Note: Complete reverse side for oil burner		55.00		
Cooling Equipment (includes ductwork and piping)		55.00		
Refrigeration (commercial)		55.00		
Storage Tank of Flammable Liquid		43.00		
Retail Cylinder Exchange		35.00		
Heating/Cooling Split Unit		38.00		
Hot Water Tank (gas or oil)		14.00		
Chimney per 10' or part of		21.00		
Backflow Preventers		19.00		
Fireplace, includes inserts		38.00		
Manufactured Housing		81.00		
Application Fee, Non-Refundable		30.00		
Total				

Please include a copy of Gas License or Corporate License.

Re-inspection Fee (failure to pass inspection, not ready for inspection, or premises was not accessible) \$45.00

Schedule Inspections: Call Planning/Building Office at (603) 746-8243 or email planzone@hopkinton-nh.gov
 Questions: Call Building Inspector at (603) 783-1509 or email buildinginspector@hopkinton-nh.gov

Permit Number	Map/Lot	Approval	Issue Date	CK
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Jeffrey Yale, Fire Chief

Hopkinton Fire Department
9 Pine Street, Hopkinton, NH 03229
o. 603.746.3181 | c. 603.731.9034 | f. 603.746.5134
www.hopkinton-nh.gov | firechief@hopkinton-nh.gov

PERMIT TO INSTALL AND OPERATE OIL BURNING EQUIPMENT

The undersigned hereby applies for a permit to install and operate oil burning equipment in compliance with RSA 153:5 and NFPA Standard #31 as follows:

Address:	
Type of Occupancy:	
Make & Serial # of Oil Burner:	
Size & Location of Tank:	
Owner:	
Mailing Address:	
Phone (days):	
Occupant's Name:	
Name of Installer:	
Business Name:	
Mailing Address:	
Phone:	
Signature of Owner or Installer:	Date:

Schedule Inspections: Hopkinton Fire Department contact information listed above.

When signed below by the Fire Chief or Designee, permission is hereby granted to operate the oil burning equipment described above which has been inspected and found to be in compliance with the State Fire Code as adopted by the State Fire Marshal.

Date

Signature of Fire Chief or Designee

Copies: Original posted near burner
Fire Department
Installer