

**RUMNEY FIRE DEPARTMENT
59 DEPOT STREET
RUMNEY NH 03266
PHONE/FAX 603-786-9924
Email: fire@rumneynh.org**

PERMIT TO INSTALL AND OPERATE LP and/or NATURAL GAS EQUIPMENT

To the Chief of the Fire Department:

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

Address: _____

Type of Occupancy: _____ Stories: _____

Owner: _____

Address: _____ Town: _____ State: _____

Occupant's name: _____

Make and Serial Number of equipment: _____

Size and Location of Fuel Container: _____

LP Gas: _____ Natural Gas: _____ Underground (UG): _____

Business Name: _____ Telephone: _____

Name of Installer: _____ License Number: _____

When signing below, the installer realizes he/she shall familiarize the occupant/owner with the operating safety, and periodic maintenance requirements of the equipment, as well as providing a copy of the manufacturer's installation and operation instructions.

Date: _____ **Signature of Installer and/or Owner:** _____

When signed below by the Chief of the Fire Department this application may be used as a TEMPORARY PERMIT authorizing the installation of LP or Natural Gas Equipment

Permit No: _____ **Signature of Chief or Designee:** _____

Permit Fee: \$40.00 Fire Department: _____ Rumney _____ Date: _____

Permission is hereby granted to operate the LP or Natural Gas Equipment described above which has been inspected and found to be in compliance with the State Fire Codes (Saf-C-6012-3) as adopted by the State Fire Marshall.

Date: _____ **Signature of Fire Chief or Designee:** _____

