



**Town of Allenstown**  
**Gas Burning Appliance Permit**

**Attention:** All equipment shall be installed in accordance with the NH State Fire Code, NFPA 54 and 58. All under ground tank/piping installations require inspection prior to burying. Pressure tests must be witnessed and documentation of pressure and duration of the test provided at the time of inspection.

House Number: \_\_\_\_\_ Street: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address if different than above: \_\_\_\_\_

Installation Company: \_\_\_\_\_

Installer: \_\_\_\_\_ Telephone: \_\_\_\_\_

1. Equipment to be installed: \_\_\_\_\_ serial #: \_\_\_\_\_

2. Equipment to be installed: \_\_\_\_\_ serial #: \_\_\_\_\_

3. Equipment to be installed: \_\_\_\_\_ serial #: \_\_\_\_\_

Size of tank(s) to be installed: A/G U/G

Installer's Signature: \_\_\_\_\_ License #: \_\_\_\_\_

Date of application: \_\_\_\_\_

**Indicate all that apply**

**\$35.00**

Complete system: \_\_\_\_\_ Interior gas piping \_\_\_\_\_

Gas appliance: \_\_\_\_\_ Exterior piping/tank \_\_\_\_\_

Staff Signature \_\_\_\_\_ Date: \_\_\_\_\_

Check # \_\_\_\_\_ Total Paid \_\_\_\_\_

Date/Time

\_\_\_\_\_ Tank Installation Inspection \_\_\_\_\_ Interior Piping Inspection

\_\_\_\_\_ Regulator Assembly Inspection \_\_\_\_\_ Underground Gas Piping Inspection

**Final Inspection Passed:** Inspector \_\_\_\_\_ Date: \_\_\_\_\_