



BRISTOL FIRE DEPARTMENT

85 Lake Street • Bristol, New Hampshire 03222
Telephone 744-2632 Fax 744-2533

PERMIT TO INSTALL AND OPERATE

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Oil Burning Equipment/Appliances

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LP/NG Equipment/Appliances

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Oil Tank Install/Replacement

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LP/NG Tank Install/Replacement

Inspection Site Address: _____

Property Owner's Name: _____ Property Owner's Phone: _____

Property Owner's Mailing Address: _____

Installation Co. Name: _____ Installation Co. Phone: _____

Technician's Name: _____ License # (if applicable): _____

Scope of work: _____

Size & Location of Fuel Container(s) (New OR Preexisting): _____

Appliance Manufacturer/Serial #: _____

Appliance Manufacturer/Serial #: _____

Application is hereby made by the belowsigned for a permit to install or alter, for the person or persons and at the location named herein, certain equipment for the keeping, storage, or use of flammable or combustible gas or liquid as described above.

Signature of Owner/Installer: _____ Date: _____

This application is made with full knowledge of the current regulations governing such installations, which will be made in compliance therewith. By signing, I agree that all work done by shall be completed in compliance with all applicable codes.

Permit Fee of \$15.00 is due at the time of application. Checks shall be made payable to: Town of Bristol.

Signature of Fire Chief/Designee: _____ Date: _____

When signed above by the Fire Chief or Designee, permission is granted to operate the gas/oil fired equipment described above. The equipment has been inspected and is found to be in compliance with all applicable codes.

All underground tank/piping installations require inspection BEFORE burying.
Pressure tests must be witnessed and/or documented.

Signature of Fire Chief/Designee: _____ Date: _____

When signed above by the Fire Chief or Designee, this application may be used as a **TEMPORARY PERMIT** to install and operate gas/oil fired equipment.

OFFICE USE ONLY

Inspection notes:

Invoice #: _____ Paid Date: _____ Check #: _____ Receipt #: _____

Permit Entered By: _____ ER Permit #: _____ Uploaded: _____

Pressure Test Received: _____ Copy of Installer's License: _____

Inspector: _____ UG Inspection Date: _____ Pass/Fail: _____

Inspector: _____ Final Inspection Date: _____ Pass/Fail: _____