



# TOWN OF SANDWICH

SANDWICH FIRE DEPARTMENT  
23 WENTWORTH HILL ROAD  
SANDWICH, NEW HAMPSHIRE 03227  
Office: 603.284.6264 / Fax: 603.284.9208

## PERMIT TO INSTALL AND OPERATE LP GAS BURNING EQUIPMENT

The undersigned hereby applies for a permit to install and operate LP gas burning equipment in compliance with RSA 153:27.

Property Location: (please include street number): \_\_\_\_\_

Property Map: \_\_\_\_\_ Lot Number: \_\_\_\_\_ Type of Occupancy: \_\_\_\_\_

Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
City/Town \_\_\_\_\_ State \_\_\_\_\_  
Phone \_\_\_\_\_

Occupant's Name (if other than owner): \_\_\_\_\_

Gas Company: \_\_\_\_\_

Make and Serial Number of LP Gas Burner: \_\_\_\_\_

Additional Appliances: \_\_\_\_\_

Size and Location of LP Tank(s): \_\_\_\_\_

Name of Installer: \_\_\_\_\_ Gas Fitter License Number: \_\_\_\_\_

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**When signed below by the Fire Chief, this application may be used as a TEMPORARY PERMIT authorizing the installation of LP Gas equipment.**

**FINAL APPROVAL:**  
\_\_\_\_\_  
**Chief or Designee / Date**

\_\_\_\_\_  
Chief or Designee / Date