



# TOWN OF BELMONT

## BUILDING DEPARTMENT

BUILDING OFFICIAL

### Generator Permit Application

Date \_\_\_\_\_

Unit Owner \_\_\_\_\_

Map/Lot No. \_\_\_\_\_

Location of Work \_\_\_\_\_

Permit No. \_\_\_\_\_

Type of Building: SFR. Multi-Unit MFG. Mod. Com.

Used As \_\_\_\_\_

Estimated Completion Date \_\_\_\_\_

Estimated Cost \_\_\_\_\_

Type of Work New - Alteration - Repair

Generator Size \_\_\_\_\_

Mechanical Name \_\_\_\_\_

Electrician Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone # \_\_\_\_\_

Phone # \_\_\_\_\_

Mechanical License No. \_\_\_\_\_

Electrical License No. \_\_\_\_\_

Contact Building Inspector to schedule an Inspection. 267-8300 Ext.111

Applicant certifies that all information given is correct and that all pertinent Building, Mechanical and Electrical codes, standards and practices will be complied with in performing the work which this permit is issued.

\_\_\_\_\_  
Printed Name & Signature of Property Owner

\_\_\_\_\_  
Printed Name & Signature of Contractor or his/her Authorized Representative making Application

\_\_\_\_\_  
Signature of Building Inspector

Permit Fee Due **\$25.00**

**\*AFTER THE FACT PERMIT FEES ARE DOUBLED\***

**OFFICE USE ONLY**

Received By: (Circle One) In System Yes No

Amount:

Date:

Payment method: Check No. \_\_\_\_\_ Cash \_\_\_\_\_ Other \_\_\_\_\_