

Application Number:	Date Issued:	Permit Number:	FEE: \$	Check No. :	Date Paid :
15-G-4244	11/3/2015	G-15-0440	25	3396	11/3/2015

NAHANT, Mass.



Building Location **70 CASTLE RD**

Owner's Name **SPANO SUSANNE**

Type of Occupancy **RESIDENTIAL**

New Renovation Replacement

Plans Submitted: Yes No

APPLIANCES	BOILER	BOOSTER	CONVERSION BURR	COOK STOVE	DIRECT VENT HEAT	DRYER	FIREPLACE	FRYOLATOR	FURNACE	GENERATOR	GRILLE	INFRARED HEATER	LABORATORY COOP	MAKEUP AIR UNIT	OVEN	POOL HEATER	ROOM/SPACE HEAT	ROOF TOP UNIT	TEST	UNIT HEATER	UNVENTED ROOM HEAT	WATER HEATER	
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Installing Company Name	GERALD THIBAUT P & H	Select one: Certificate
Address	131 NICHOLS ST., WILMINGTON, MA 01887	<input type="radio"/> Corporation
Business Telephone	7816409818	<input type="radio"/> Partnership
Name of Licensed Plumber or Gas Fitter	JERRY THIBAUT	<input type="radio"/> Firm/Co.

INSURANCE COVERAGE :
 I have a current liability insurance policy or its substantial equivalent which meets the requirements of MGL Ch. 142.
 Yes No

Please indicate the type coverage by checking the appropriate box.
 A liability insurance policy Other type of indemnity Bond

OWNER'S INSURANCE WAIVER: I am aware that the licensee does not have the insurance coverage required by Chapter 142 of the Mass. General Laws, and that my signature on this permit application waives this requirement.

Signature of Owner or Owner's Agent: _____ Select one: Owner Agent

I hereby certify that all of the details and information I have submitted (or entered) in above application are true and accurate to the best of my knowledge and that all plumbing work and installations performed under the permit issued for this application will be in compliance with all pertinent provisions of the Massachusetts State Gas Code and Chapter 142 of the General Laws.

By _____
 Title _____
 City/Town _____
APPROVED (OFFICE USE ONLY)

Type of License:
 Plumber
 Gasfitter
 Master
 Journeyman

Signature of Licensed Plumber or Gas Fitter _____
 License Number **10967**

Print **Exit**