

848 North Main Street
Laconia, New Hampshire 03246
603-524-6881

**Laconia Fire Department
Fire Prevention Division**



Permit for Cutting and Welding

Permit Number: _____ **Expiration Date:** _____

Permit Requested By: _____

Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Business Telephone: _____ **Emergency Telephone:** _____

Emergency Cellphone: _____ **Emergency Pager:** _____

Building Location: _____

Construction Type: _____

Description of Work: _____

Work Period: From: _____ To: _____ **Permenant:** _____

Materials or Hazards: ____ A fire watch shall be provided by the contractor. The fire watch shall remain in effect a minium of 1 hour past the cessession of work in the area.

Fee Paid: __\$40.00__ **Cash/Check #** _____ **Date:** _____

Approved By: _____ **Date:** _____