



TOWN OF HUDSON

FIRE DEPARTMENT - INSPECTIONAL SERVICES DIVISION

12 School Street • Hudson, New Hampshire 03051 • Tel: 603-886-6005 • Fax: 603-594-1142

CERTIFICATE OF OCCUPANCY APPLICATION

This Certification of Occupancy Application shall be completed and submitted to the Inspectional Services Division a minimum of two weeks prior to the date of the desired permit.

All applicable fees due to the Town of Hudson shall be paid in full at the time of submission.

Certificate of Occupancy Application fees:

Residential	\$100.00
Commercial/Industrial	\$200.00

Please confirm the exact amount due with the Inspectional Services Division at the time of submission.



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CERTIFICATE OF OCCUPANCY - PLEASE PRINT

Address: _____		Office use: Map: _____ Lot: _____ Zone: _____
Type of Construction: _____ Unit # _____		
<u>Permit #'s</u>		
Building: _____	Electrical: _____	Plumbing: _____
Fire alarm: _____	Sprinkler: _____	Tank installation: _____
Mechanical (gas or oil): _____		
Sewer <input type="checkbox"/> or Septic <input type="checkbox"/> Town Water <input type="checkbox"/> or Well <input type="checkbox"/> Fire Sprinkler System Yes <input type="checkbox"/> No <input type="checkbox"/>		
Will the applicant/owner manufacture, assemble or produce any product, regardless of water use? Yes <input type="checkbox"/> (Need IDA Form) No <input type="checkbox"/> (Need IDA Checklist)		
*Please consult the Town Engineer at 886-6008 with any questions		
Proposed Use: _____		
Name to Appear on Certificate: _____		
Date Certificate Requested For: _____		
_____ Signature of Applicant/Owner	_____ Phone	_____ Print Contact Name
Email: _____		
Please Do Not Write Below This Point		
State of NH Septic Approval for Operation #: _____		
Dated: _____ Number of Approved Bedrooms/GPD: _____		
EPA Laboratory Water Test #: _____ Dated: _____		

***Copies of the State of NH Septic Approval of Operation and EPA Laboratory Water Test are required at the time of Certificate of Occupancy application.**