



# Town of CARVER

## Request for Plumbing or Gas Inspection

Telephone: 866-3405 ext 1043 Fax: 508-866-3430

Please complete Parts 1 and 2 of this form and fax to 508-866-3430, mail or hand deliver to:  
Inspector of Plumbing & Gas, 108 Main Street Carver, MA 02330.

Any questions, please call the inspector during office hours daily from 8:00-8:30am.

**\*\*SOMEONE MUST BE AT THE LOCATION FOR AN INSPECTION**

### PART - 1

PLUMBING PERMIT # \_\_\_\_\_

GAS PERMIT # \_\_\_\_\_

Permit # REQUIRED for processing inspection request

Today's Date: \_\_\_\_\_

I \_\_\_\_\_ hereby request an inspection under Massachusetts General Law Chapter 142.

Job Location: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_

Date Requested:

Tuesday \_\_\_\_\_  Wednesday \_\_\_\_\_  Thursday \_\_\_\_\_

### PART - 2 TYPE OF INSPECTION REQUESTED

Rough Inspection for: \_\_\_\_\_

Final Inspection for: \_\_\_\_\_

Re-Inspection for: \_\_\_\_\_

Other: \_\_\_\_\_

License No: \_\_\_\_\_ Licensee Signature \_\_\_\_\_

Comments: \_\_\_\_\_

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This section to be completed by Carver Inspector of Plumbing & Gas

Inspection Date: \_\_\_\_\_ Inspector: \_\_\_\_\_

Approved  Disapproved  No Access

Comments: \_\_\_\_\_

\_\_\_\_\_