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Town of Milton Inspection Request Form

The man and the	inspection Request	
Date of Request:	Desired Date (Tuesday or Wednesday)	
	Permit Number:	
Project Address:		
Requested By:		
Company Name: _		
Telephone Number:		
Email: _		
	Type of Inspection	
Building Found/Footing		Electrical Under Ground
Foundation Wall		Rough
☐ Slab		Slab
Pile		Safety
Bond Beam		Pool Bonding
Sheathing		Pool Grounding
Framing		Temporary Pole
Above Ceiling		Final
Insulation		Other
Mechanical		Gas
Rough/TPO		Rough/TPO
Hood		Safety
Change Out		Final
Final Other		C Other
Plumbing Rough/TPO		Cert. of Occupancy
Slab	Comments:	
Sewer		
Final		
Email form to: Lan	duse@miltonnh-us.com.or.dron.off.a	t the Land Use Departme

I form to: Landuse@miltonnh-us.com or drop off at the Land Use Department in Town Hall