

TOWN OF

SEABROOK, NEW HAMPSHIRE

99 LAFAYETTE ROAD ■ PO BOX 456 SEABROOK, NH 03874-0456

PHONE: (603) 474-3311 FAX: (603) 474-8007

www.seabrooknh.info

STATE OF NEW HAMPSHIRE TOWN OF SEABROOK

BUSINESS LICENSE PERMIT

Issue Date:	May 17,	2023	Expiration Date:	Dec 31, 2023
Busines	ss Name:	DAN DUNN PLUM	IBING AND HEATING LLC	
Address of Business	Location:	191 LAFAYETTE R	D	
Owner and	Address:	DANNY DUNN		
		1 CHARRON CIRC	LE EXETER, NH 03833	
		Board of Selectme	n Chairman	
			Vice Chairman	
			Clerk	

This permit is subject to the ordinances and regulations of the Town of Seabrook.

All businesses shall be licensed on an annual basis until and/or unless the licensed premises are vacated, relocated or ownership of the business is changed or permit holder is no longer in compliance with federal or state regulations or those of the Town of Seabrook.

THIS PERMIT IS NOT TRANSFERABLE

THIS PERMIT MUST BE POSTED IN A PROMINENT PLACE AT THE BUSINESS

LOCATION

New

BUSINESS LICENSE APPLICATION

BUILDING & HEALTH

JAN 2 4 2023

Town of A Livesti, NH

TOWN OF SEABROOK BUILDING & HEALTH PO BOX 456 SEABROOK NH 03874 (603) 474-3871 Date: 1 - 24-2023

Fee:__\$100

All New Business Applications are valid between the date they're approved and December 31st of that year. Renewals must be in by December 15th of their expiring year. No license will be issued to a business in a new building until the building is granted a certificate of occupancy and all departments sign off after their inspections. The application must be complete and legible. Checks can be made to the Town Of Seabrook.

Business Name: Dan Dunn Plumbing and Heating LCC
Physical Address: 191 Lafayette Rd Unit #:
Mailing Address: Po Box 1986
Business Telephone: 603 924 2910 Emergency Telephone: 603 - 270 8631
Owner's Name: Danny Dunn E-Mail: dandunplumbing GSB gmail, co
Property Owner's Name: Dany Duny
Property Owner's Mailing Address: 1 Chavron Civile Exeter NH 03833
Property Owner's Telephone #: 603 - 720 8631
Property Owner's Signature:
Section 3: Business Information Commercial: Industrial: Home Office: Are there any hazardous or explosive materials manufactured or stored on site? YES NO
If Yes, Please Describe:
Type of Business: Plumbing and Heating
I hereby certify that all of the information presented is true & accurate
- October 1
Signature of Applicant (or authorized persons)
DEPARTMENT APPROVALS
Building / Health Water Dept. Sewer Dept. Fire Dept. Police Dept.
ApprovedApprovedApprovedApprovedApproved

Map:____ Lot:____ Seq: ____

<u>IMPORTANT:</u> Completion of this form is required of all non-residential sewer users. The information provided will be used in determining the appropriate Sewer User Classification for your business or organization. All items must be completed. <u>Incomplete forms will be returned</u>. Please print or type. Attach additional pages if necessary.

<u>NOTE:</u> Any business that holds a current Seabrook Industrial Wastewater Discharge Permit may attach a copy of the first page of their permit in lieu of completing this form.

<u>NOTE:</u> Any business that has a current Class 4 or Class 5 Commercial/Industrial Sewer User Classification may attach a copy of their Notice of Classification in lieu of completing this form.

		3 A	W. 1	III I KIG
	/	a Duna Alur		
Physical (Street) Addre	~ 7	cyette Rd	P	hone: 603-9742910
Business Owned by:	DannyD	ypn		
Authorized Representa	tive**: /4 (<i>U</i>	Title	owner
Mailing Address (if dif	ferent): Po B	0x 1986 Seab	rook NHC	7874
Phone (if different): 🔟	603- 77084	S/ Facili	ty NAICS Code	s) Zoneskorkork
1. What types of busing	ness and/or activities	re carried out at this locat	ion? PLEASE I	DESCRIBE FULLY
ficinos:	cial Sea	eating Kesi	at a traj	GAC
Compres	CIAL SUL	11 (-		
2. Number of employ	ees: Shift 1	Shift 2 Sl	iift 3	Total
-				
3. Hours of operation	: M 10 T 10	w_10_ Th_10	F 70	Sa Su
4. Does this business	discharge any wastew	ater to the Town sewer sys	stem other than i	normal bathroom wastes?
If "yes", describe:	NO			
5. Identify all on-site	wastewater treatment:	If none, place an "X" he	re: 🔽	
Grease Interceptors (sizes & numbers)	Grit or Sand Traps (sizes & numbers)	Oil/Water Separators (sizes & numbers)	Other Pretr	eatment (describe)
(SIEOS & ITAMIOOTO)	(bized de l'antideza)	(bibbs de livilions)		
		440	-	
6. Are there any floor	drains at this location	? No, please g	give their numbe	& locations, and describe
the specific purpose of	each.			
7 Is there a fire sprin	kler system at this loca	ation? No and	Site APP	aved by flanning
De De la companya de	silding inspe	durand Fiv	re deft.	()
	rs, do you anticipate a	ny major facility expansion	on or change in t	he activities performed? If
"yes", describe:	70	**************************************		
Town of Seabrook, Nev	W Hamashira			Sewer Department
DWILDLOCADTOOK, INC.	w cialinosime			OCMET DEDUTINE!!!

Form rev: May 4, 2007

Page 1 of 2

nan five (5) gallons. Estimate the tut is not limited to, all fuels, oils,	rous or hazardous chemicals that are lypical quantity of each chemical that is solvents, soaps & cleaning solutions, ate pages if needed. If none, place an	s kept on hand. Your disinfectants, inks &	list must include,
Chemical Name	Use or Purpose	Typical Qua	ntity On-hand
I. What are the various ways wate	r is used at this location? Estimate the	average amount use	d for each purpose.
· ·	Purpose or Use		Gallons Per Day
. bathroom waste (may estimate	e using 13 gallons per employee; 3 gal	lons per customer)	JOGPD
	-		
).			
2. Is there a water well at this loca 3. Other than storm water, is any	tion? When was it last	a lake, stream, priva	
3. Other than storm water, is any value of the other many lace else other descriptions. 4. Has this business ever been the		a lake, stream, private:	te sewer, leach field
2. Is there a water well at this local 3. Other than storm water, is any unjection well, or anyplace else other 4. Has this business ever been the enforcement action with respect to the enforcement. Certification: have personally examined and attachments. Based upon the end attachments. Based upon the end attachments and attachments are enabled for submitted information is true to be not the end time of the e	water discharged from this location to ir than the Town sewer? If so, describ subject of a notification, citation, fine	a lake, stream, private: e, warning order, or nation submitted for my inquiry of ported herein, i m aware that the	other governmental in this documental those individua believe that tiere are signification

Please direct any questions to: Industrial Pretreatment Program Manager, Town of Seabrook, P.O. Box 456, Seabrook, NH 03874-0456 (603) 474-8012 ext. 11 tcampbell@seabrooknh.org

Town of Seabrook, New Hampshire Form rev: September 4, 2009

Seabrook Police Department 7 Liberty Lane Seabrook, New Hampshire 03874 603-474-5200

Filing Date: 1-24-2023
BUSINESS NAME: Dan Dunn Plumbing and Healing UC
BUSINESS ADDRESS: 191 Lafayette Rd
BUSINESS TELEPHONE NO.: 603-9782910
BUSINESS FAX NO.: 603-974 2914
IS THERE A SAFE ON THE PREMISES? YES NO
IS THE BUSINESS ALARMED Yes No
Alarm Company Name:
Alarm Company Tele NO.: 603-402-8873
IF THERE ARE ZONES, PLEASE LIST WHAT ZONE AND WHERE IT'S LOCATED.
Alarm Type(s):
Emergency Contacts (Primary, Secondary, Etc.)
1) <u>Suzanne</u> Dun 603-9443953 Name Telephone #
2) Steve Jewett 978 994-5180
Name Telephone # 3) Troy Dunn 603 7025664
Name Telephone #
POLICE USE ONLY

Account #:____

Inctions	ZBA Cases	Planning Board	Cases		11	MapsOnli	une
CBMS -	Busines	ss License	Print Blan	k PDF Search Impo	rt Export Export Bl	lank Owwee	LOGOUT
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depar	tment appr	ovals require	rtment Approved for this app	als (staff will s	elect/highligh	it all	4
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Police D	Department Dept J. Rein						
Fire Dep	pt K. McDor partment						100 mg
Sewer D	/Health Depai Department	tment					
Steve K	eaney ol Dispatch	7					
Send F	imail to Off	ner Town Dor	partments for	Α .	(a)		
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