



City of Salem Routing Slip

Permit No.: _____
(if applicable)

Date: _____

Project Location: _____

New Construction: _____

Certificate of Occupancy: _____

Departments:

Assessors _____
93 Washington Street, Room 6

Date: _____

City Clerk _____
93 Washington Street, Room 1

Date: _____

Engineering _____
5 Jefferson Avenue

Date: _____

Water Dept. _____
98 Washington Street, 2nd Floor

Date: _____

Cross Connection _____
5 Jefferson Avenue

Date: _____

Planning _____
98 Washington Street, 2nd Floor

Date: _____

Conservation _____
98 Washington Street, 2nd Floor (Planning Dept.)

Date: _____

Electrical _____
48 Lafayette Street

Date: _____

Fire Prevention _____
29 Fort Avenue

Date: _____

Health _____
98 Washington Street, 3rd Floor

Date: _____

Building Inspector _____
98 Washington Street, 2nd Floor

Date: _____