

**TOWN OF NORTH PROVIDENCE
DIVISION OF INSPECTIONS**

2000 Smith Street
North Providence, RI 02911
Office (401) 233-1419 ~ Fax (401) 719-1608

REQUEST FORM

DATE: _____

- **BUILDING**
- **ELECTRICAL**
- **PLUMBING/MECHANICAL**
- **MINIMUM HOUSING**
- **PLANNING/ZONING**

THE FOLLOWING INFORMATION/ASSISTANCE:
(Please describe below)

PERSON REQUESTION INFORMATION/ASSISTANCE:

NAME: _____

ADDRESS: _____

PHONES: _____

DAYS

NIGHTS

Please be advised that the above Offices have 7-10 working days to reply to your request