PERMIT #
PLAN #

TOWN OF EAST HARTFORD – DEPARTMENT OF INSPECTIONS & PERMITS
APPLICATION FOR PLUMBING, HEATING, AIR CONDITIONING, REFRIGERATION AND SPRINKLER PERMIT

CHECK ONE: ☐ A/C or REFRIG.   ☐ SPRINKLER or FIRE SUP.   ☐ PLUMBING or PROCESS PIPING   ☐ HEATING or VENT/EXHAUST

LOCATION OF JOB:

_____
Street #   Street Name

_____   _____   _____
Apt #   Floor #   Lot/Map #

1. **PROPERTY OWNER:**_____

2. ADDRESS:_____
   Street # and Name   Town, State, and Zip Code
3. PHONE #_____CELL # _____EMAIL:_____

4. **APPLICANT:**_____

5. COMPANY NAME:_____

6. ADDRESS:_____
   Street # and Name   Town, State, and Zip Code
7. PHONE #_____ CELL #_____EMAIL:_____

8. **LICENSE #**_____**EXPIRATION DATE:** _____

9. **NAMES OF SUBCONTRACTORS AND THEIR TRADES**: _____

10. **IS THIS A CONTRACT COST?**   [ ] YES   [ ] NO

11. **BUILDING TYPE :**   [ ] Residential   [ ] Commercial

12. **TYPE OF JOB:**   [ ] Original   [ ] Alteration

13. **SPECIFY CODE :**   [ ] IBC   [ ] IRC (1- & 2-family only)

14. **VALUE: $**_____ **FEE ENCLOSED: $**_____
    Fee   Estimated Cost
    Residential   - Commercial
    $30.00* $70.00* $.00 -$1,000* Includes Certificate of Approval
    $15.00 $30.00   each additional $1,000 or fraction thereof
    (Fees include State Education fee of $0.26/$1,000 valuation, higher fees include Fire Marshal)

IMPORTANT! AFTER COMPLETING ALL PAGES OF APPLICATION, SIGN BELOW, AND MAKE CHECK PAYABLE TO *TOWN OF EAST HARTFORD*, COVERING PROPER AMOUNT OF FEE. (SEE FEE SCHEDULE) BRING PAYMENT, APPLICATION AND PLANS TO: **TOWN OF EAST HARTFORD, DEPARTMENT OF INSPECTIONS AND PERMITS, 740 MAIN STREET, EAST HARTFORD, CONNECTICUT 06108.**

ALL WORK COVERED BY THIS APPLICATION HAS BEEN AUTHORIZED BY THE OWNER OR AGENT OF THIS PROPERTY AND WILL BE DONE IN STRICT ACCORDANCE WITH THE BUILDING CODE.

*AS APPLICANT/AGENT I HEREBY CERTIFY, UNDER PENALTY OF LAW FOR FALSE STATEMENT, THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER IN FEE [NOT TENANT] AND THAT I AM AUTHORIZED TO MAKE THIS APPLICATION.

_____ _____ *_____ _____

OWNER OF PROPERTY/*AGENT   DATE   APPLICANT/CONTRACTOR   DATE
      (SIGNATURE)   **(SIGNATURE)**

*BUILDING DEPARTMENT WITNESS_____

FILL OUT THIS PAGE FOR A/C, REFRIGERATION, OR HEATING.
(FOR PLUMBING, WATER HEATER, OR SPRINKLER, FILL OUT PAGE 3 INSTEAD)

AIR CONDITIONING OR REFRIGERATION

DUPLICATE PLANS BY: ADDRESS:

DESCRIPTION OF EQUIPMENT

☐ PACKAGE UNIT   ☐ SPLIT SYSTEM   ☐ WATER COOLED   ☐ AIR COOLED   ☐ EVAPORATIVE CONDENSER

TYPE OF INSTALLATION   TYPE OF REFRIGERANT

☐ INDUSTRIAL   ☐ COMMERCIAL   ☐ RESIDENTIAL   ☐ REPLACEMENT

POUNDS USED	HORSE POWER	TYPE RELIEF VALVE	TYPE OF CONTROL SYSTEM

TOTAL AMPS	VOLTAGE	SIZE OF FRESH AIR DUCT INSTALLED	AMOUNT OF CFM

MANUFACTURERS CATALOG DATA, RATING, ETC.

ELECTRICAL WORK BY: ADDRESS:

HEATING

TYPE OF INSTALLATION:

☐ OIL BURN ER   ☐ HEATING SYSTEM   ☐ VENTILATION   ☐ SPRINKLER   ☐ GAS BURNER   ☐ STACK   ☐ INCINERATOR   ☐ MISC. IDENTIFY

SIZE OF TANK	LOCATION OF TANK	SIZE OF FILL	SIZE OF VENT	BTU. EQUIP. AT REGISTER	FURNACE MAKE AND NO.

BTU AT BONNET	FIRING RATE	BOILER OR FURNACE MAKE AND NO.	BTU SQ. FT.NET	BTU OR SQ. FT. GR.	FIRING RATE

FLOORS HEATED	BLDG. NEW OR OLD	INSULATED - YES/NO	TYPE OF WALL	INSULATION	ROOF OR CEILING	INSULATION

AVG. SYSTEM WATER TEMP.	BTU/SQ. FT./HR. EMISSION	INDOOR – OUTDOOR TEMP. DIFFERENCE	FAHRENHEIT	MAKE OF RADIATION: BASE -

BOARD, COPPER CONVECTORS, OR C.I. RADIATION. OUTPUT PER SECTION OR LINEAL OF RADIATION. SQ. FT. OR BTU

HEAT LOSS and/or HEAT GAIN SCHEDULE TO BE INCLUDED FOR ALL JOBS
**SYSTEM GUARANTEED TO HEAT ALL ROOMS TO 68° IN ZERO WEATHER, STEAM 1-3 LBS.,
HOT WATER (GRAVITY 140) (CIRCULATED 180); WARM AIR (GRAVITY 250) (FORCED CIRCULATION 200)
INCLUDE DOMESTIC HOT WATER DEMAND**

DESCRIPTION, FURTHER DETAIL, OR REMARKS (*Use separate page for drawing as needed*) **:**

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FILL OUT THIS PAGE FOR PLUMBING, WATER HEATER, OR SPRINKLER

(FOR, A/C, REFRIGERATION, OR HEATING, FILL OUT PAGE 2 INSTEAD)

PLUMBING

KIND OF INSTALLATION	SIZE OF MAIN DRAIN	#BATH TUBS	#LAVATORIES	# SINKS	# WASH TUBS	# TOILETS	STYLE

# URINALS STYLE	# CONDUCTORS SIZE		# STACKS	SIZE		AREA OF ROOF	

# FLOOR DRAINS	# CATCH BASINS	# OTHER FIXTURES	KIND OF OTHER FIXTURES

TOILETS VENTILATED BY WINDOW ____YES ____NO	WINDOW SIZE	IF NO WINDOW, HOW VENTILATED	DUCT SIZE	SEWAGE & WATER FACILITIES ____YES ____NO

WATER HEATER

WATER HEATER ►	TYPE		MANUFACTURER	
TANK DETAIL ►	CAPACITY	TEST PRESSURE	WORKING PRESSURE	TYPE
SAFETY DEVICES ►	TEMPERATURE RELIEF VALVE	MANUFACTURER	PRESSURE RELIEF VALVE	MANUFACTURER

SPRINKLER OR FIRE SUPPRESSION

DUPLICATE PLANS BY:	ADDRESS:
☐ SPRINKLER ☐ FIRE SUPPRESSION	TYPE OF SYSTEM:
LOCATION/AREA OF WORK:	TYPE OF AGENT:

DESCRIPTION, FURTHER DETAIL, OR REMARKS (*Use separate page for shop drawings, layouts, and hydraulics*) **:**

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