

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: _____
- 3. PHONE # _____ CELL # _____ EMAIL _____
- 4. APPLICANT: _____
- 5. COMPANY NAME: _____
- 6. ADDRESS: _____
- 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. SPECIFY CODE: [] IBC [] IRC (1- & 2-family only)
- 13. VALUE: \$ _____ FEE ENCLOSED: \$ _____

Fee Residential	Fee Commercial	Estimated Cost	
\$30.00	\$90.00 (\$40.00 Fire Marshal/\$30.00 Bldg. and \$20.00 Certificate of Approval)	\$0.00 - \$1,000	
\$15.00	\$40.00 (each additional \$1,000 or fraction thereof \$20.00 Fire Marshal/\$20.00 Building)		

(All fees include State Education fee of \$0.26/\$1,000 valuation)

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 (SIGNATURE) DATE *

APPLICANT/CONTRACTOR (SIGNATURE) DATE

AIR CONDITIONING OR HEATING

AIR CONDITIONING:

HEATING

DESCRIPTION OF EQUIPMENT

TYPE OF INSTALLATION

OIL BURNER

GAS BURNER

PACKAGE UNIT

SPLIT SYSTEM

OTHER

FURNACE MAKE AND #

TYPE OF INSTALLATION

TYPE OF REFRIGERANT

FILL/VENT SIZE

BTU SQ FT NET

REPLACEMENT

TYPE OF CONTROL SYSTEM

CONVERSION

BASEBOARD SIZE

MANUFACTURERS CATALOG DATA, RATING, ETC. YES OR NO

HEAT LOSS CALCULATION

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

PLUMBING

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

FLOOR # CATCH
DRAINS BASINS

TOILETS VENTILATED DUCT SIZE

SPRINKLER

SPRINKLER FIRE SUPPRESSION TYPE OF SYSTEM

CONTRACTOR'S WAIVER _____ WORKER'S COMP _____ HOME OWNER'S WAIVER _____

NOTE: HOME OWNER ASSUMES FULL RESPONSIBILITY FOR PERMIT, INSPECTION & WORK PERFORMED.

DEPARTMENT USE ONLY

DEPARTMENT DECISION – APPLICATION IS HEREBY:

BUILDING DEPARTMENT: **APPROVED** **DISAPPROVED**

DATE

CHIEF INSPECTOR