

MECHANICAL Permit Application

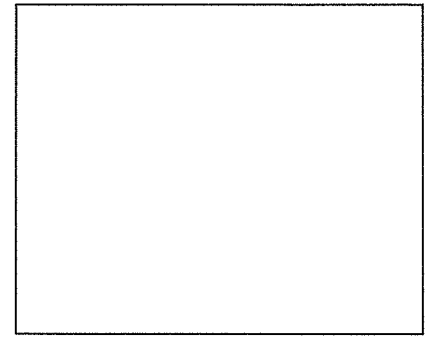
Application Date: _____ Application #PR ____ 2012 _____

Application Type: Choose One Only

Electrical ___ *Fire Alarm ___ *Ansul System ___ *Sprinkler _____

CRS# _____

*Grease Exhaust Hood _____ * **Noted permits require Fire Marshal approval**



Entered By: _____

Plumbing ___ Does this plumbing work include gas piping? ___ **If so, prior to any gas test, bonding of CSST (per installation instructions) must be completed**

HVAC ___ Does this HVAC work include gas piping? ___ **If so, prior to any gas test, bonding of CSST (per installation instructions) must be completed**

Occupancy Type: Check One

___ One Family Home ___ Two Family Home ___ Three Family Home

___ Other (Please describe such as retail, business, etc.) _____

Description of Work _____

Value of Work \$ _____ Estimate of square foot of work area: _____

Total Fee Paid _____ *Paid By* _____

JOB LOCATION: _____

NAME OF TENANT IF A BUSINESS: _____

Property Owner Name: _____

Property Owner Address: _____

Phone: _____ Fax: _____ Cell: _____

Email Address: _____

Applicant's Name: _____

Business Name: _____ Registration/Lic# _____ Exp Date _____

Address: _____

Phone: _____ Fax: _____ Cell: _____

Email Address (all inspections will be emailed) _____

List Supporting Documentation Submitted: _____

SEE OTHER SIDE TO COMPLETE REQUIRED INFORMATION AND SIGNATURES

Town of West Hartford, Building Department, 50 South Main Street, West Hartford, CT 06107, (860)561-7530

Additional Information on electrical applications:

Wiring Method _____
Residential _____ Commercial _____ Industrial _____

Additional information for plumbing applications:

List number of fixtures to be installed _____ Does this include whirlpool bathtub? _____
If water heater list _____ gallons Type of Fuel: Oil _____ Natural Gas _____ LP Gas _____ Other _____
List make model and number of water heater _____
If new water service list size of main supply line _____ and DWV Vent size _____
Please note protection against physical damage must be in accordance with 2003 CT Code IPC 305.8 for commercial and 2003 CT Code IRC2603.1 for one and two family dwellings.
If gas piping to be installed, list size and type of piping to be installed _____
If installing Corrugated Stainless Steel Tubing (CSST), installation and protection must be in strict accordance with manufacturers requirements, which call for proprietary steel hardened nail plates and accessories. Refer to manufacturers latest installation manual for complete required details.

Additional information on HVAC applications:

Please note that Heat Loss and Heat Gain (cooling) sheet must accompany application per 2003 CT IMC 312.1 or 2003 CT IRC 1401.3 for heating and cooling load calculations
Type of fuel: Oil _____ Natural Gas _____ LP Gas _____ Electric _____ Solid (specify type) _____
Describe all heating and cooling equipment _____
Model _____ Input BTU _____ Net Output BTU _____

TO THE BUILDING DEPARTMENT, TOWN OF WEST HARTFORD, CT: I, the undersigned hereby agree to conform to all the requirements of the Laws of the State of Connecticut and the Ordinances of the Town of West Hartford and to notify the Building Inspector of any alteration in the plans or specifications.

CERTIFICATION: I hereby certify that: I am the owner of record of the named property OR: that the proposed work is authorized by the owner of record and I have been authorized to make this application as an authorized agent, and we agree to conform to all applicable laws, regulations and ordinances. All information contained within is true and accurate to the best of my knowledge and belief. No work shall be stated until the application has received the signed approved permit.

_____ **OR** _____
Property Owner Authorized Agent

Print Name Print Name

This information given to the town is only in support of permit application. No work can start until applicant has received the signed approved permit.
CURRENT EDITION OF BUILDING CODE IN EFFECT IS
2005 CONNECTICUT STATE BUILDING CODE

PLEASE DO NOT WRITE BELOW THIS LINE. FOR TOWN USE ONLY.

Building Approval _____ Date of Building Approval _____

Conditions of Building Approval _____

If Sprinkler, Fire Alarm, Ansul System or Grease Hood permit application needs Fire Marshal OK

Fire Approval _____ Date of Fire Approval _____

Conditions of Fire Approval _____