



TOWN OF PROSPECT – BUILDING DEPARTMENT HEATING PERMIT APPLICATION

Date _____

Property Location _____ Lot #: _____

Building Type (Please Check): Residential Commercial Other: _____

OWNER INFORMATION

Name: _____
Address: _____
City: _____
State: _____ Zip Code: _____
Home #: _____
Cell #: _____

CONTRACTOR INFORMATION

Name: _____
Address: _____
City: _____
State: _____ Zip Code: _____
Company: _____
Address: _____
City: _____
State: _____ Zip Code: _____
License Type & #: _____
Work #: _____
Cell #: _____

DESCRIPTION OF WORK:

Check All That Apply:

- | | | | | |
|--|--|------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> Furnace – Hot Water | <input type="checkbox"/> Furnace – Hot Air | <input type="checkbox"/> Hydro Air | <input type="checkbox"/> Air Conditioning | <input type="checkbox"/> Wood Stove |
| <input type="checkbox"/> Pellet Stove | <input type="checkbox"/> Gas Stove | <input type="checkbox"/> Gas Log | <input type="checkbox"/> Gas Fireplace | <input type="checkbox"/> Gas Piping |

TYPE OF FUEL:

- | | | | | | | |
|-------------------------------|-----------------------------------|---------------------------------------|---------------------------------------|------------------------------------|--------------------------------|---|
| <input type="checkbox"/> Oil | <input type="checkbox"/> Gas City | <input type="checkbox"/> Coal | <input type="checkbox"/> Electric | <input type="checkbox"/> Heat Pump | <input type="checkbox"/> Solar | <input type="checkbox"/> Liquid Propane |
| <input type="checkbox"/> Wood | <input type="checkbox"/> Tank Oil | <input type="checkbox"/> Tank Propane | <input type="checkbox"/> Other: _____ | | | |

VENTING (Chimney):

- | | | | | |
|---------------------------------|---------------------------------|----------------------------------|-----------------------------------|---------------------------------------|
| <input type="checkbox"/> Type A | <input type="checkbox"/> Type B | <input type="checkbox"/> Masonry | <input type="checkbox"/> Existing | <input type="checkbox"/> Other: _____ |
|---------------------------------|---------------------------------|----------------------------------|-----------------------------------|---------------------------------------|
- Size: _____

HOT WATER: Unit Name & Model: _____ Heat loss of space in BTU: _____ Heat Supplied in BTU: _____

of Zones: _____ Controlled By: _____ Thermostat Type: _____

COOLING: Unit Name & Model: _____ Cooling Load in BTU: _____ Cooling Supplied in BTU: _____

HOT AIR DISTRIBUTION: Unit Name & Model: _____ Heat loss of space in BTU: _____ Heat loss supplied in BTU: _____

HOT WATER HEATER: Unit Name & Model: _____ Unit Size: _____ Other: _____

I hereby certify that:

- I am the owner on record of the named property
- I have been authorized by the owner on record to make application for this project
- The project will conform to all applicable laws, regulations, and ordinances of the State of Connecticut as the Town of Prospect
- All information stated within this application is true and correct to the best of my knowledge and belief

Signature: _____ Date: _____

Owner/Applicant

Estimated Value of Project: \$ _____

PERMIT FEE: _____ STATE FEE: _____

TAXES UP TO DATE: _____

PERMIT NUMBER: _____

DATE ISSUED: _____