



John DeStefano, Jr.
Mayor

Andrew J. Rizzo, Jr.
Building Official

HEATING/AIR CONDITIONING PERMIT APPLICATION

City of New Haven
Building Department

200 Orange Street
New Haven, CT 06510
Telephone (203) 946-8045 – Fax (203) 946-8049

PERMIT NO:

APPLICATION DATE:

BUILDING PERMIT NO:

TYPE OF PERMIT:

- AIR CONDITIONING
 HEATING

APPLICATION TO DO HEATING/COOLING WORK IN ACCORDANCE WITH THE HEATING CODE OF THE STATE OF CONNECTICUT AND ALL APPLICABLE STANDARDS - IN A BUILDING HEREINAFTER DESCRIBED:				
WORK LOCATION				
PROPERTY OWNER:		PROPERTY OWNERS ADDRESS		OWNER PHONE: (____) _____ - _____
KIND OF BUILDING:				
<input type="checkbox"/> NEW - RESIDENTIAL <input type="checkbox"/> REHAB - RESIDENTIAL <input type="checkbox"/> ADDITION - RESIDENTIAL <input type="checkbox"/> NEW - NON RESIDENTIAL <input type="checkbox"/> REHAB - NON RESIDENTIAL <input type="checkbox"/> ADDITION - NON RESIDENTIAL				
AREA TO BE CONDITIONED:		BOILER:	MAKE:	
TOTAL REFRIGERATION REQUIRED:		<input type="checkbox"/> WARM AIR SYS. <input type="checkbox"/> FIREPLACE	FUEL: <input type="checkbox"/> GAS <input type="checkbox"/> OIL	
NO. COOLING MACHINES:	TYPE:	C.F.M.	<input type="checkbox"/> HOT WATER <input type="checkbox"/> STEAM	TOTAL BTU'S:
PERMISSION TO:				
INSPECTOR COMMENTS:				
APPLICANT:			INSPECTOR SIGNATURE: _____	
CONTRACTOR NAME:		CONTRACTOR CELL/PHONE:		APPROVED ON: ____ / ____ / 20
		Cell # (____) _____ - _____ Phone # (____) _____ - _____		
CONTRACTOR BUS. ADDRESS:			COST ESTIMATE: \$ _____ PERMIT FEE: \$ _____	
CONTRACTOR LICENSE: (TYPE & NUMBER)			CERT. OF APPROVAL: \$ 30.00 TOTAL FEES: \$ _____	

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/or 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.

X _____ DATE: ____ / ____ / 20
Signature of Owner/Authorized Agent

Notarized By: _____ DATE: ____ / ____ / 20