

Building Permit No. _____

Date of Application: _____

Application for HVAC/Fuel Tank Permit

Town of East Lyme Building Department, 108 Pennsylvania Avenue, Niantic, CT 06357
Telephone: (860) 691-4114 Fax: (860) 691-0351

Application must be filled out completely in ink

RESIDENTIAL COMMERCIAL INDUSTRIAL OTHER

JOB LOCATION: _____ Assessor's Map _____ Lot _____

Property Owner's Name _____

Property Owner's Address _____ City: _____ ST _____ ZIP _____

Contractor's Name _____ TEL No. _____ ST LICENSE No. _____

Contractor's Address _____ City: _____ ST _____ ZIP _____

Description of Work: _____

NOTE: A site plan must be provided showing the proposed location of fuel tanks, A/C units, etc. You must obtain approval from Beach Community Zoning Officials for fuel tank and A/C unit placement. Please specify the location of all new or replaced appliances.

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.

Applicant must call to schedule inspection AFTER permit is issued

Applicant Signature: _____ Date: _____

Applicant Address: _____

Please Print Name _____ Tel. No. _____

If not prepaid as indicated by Building Permit number above please provide an:
Estimated Value of Work: \$ _____
Permit Fee \$ _____
State Education Fee \$ _____
Total Due \$ _____

Approved by: _____ Date: _____
(building official)