



DEPARTMENT OF INSPECTION

185 South Main Street, 5th floor; Waterbury, CT 06706
Inspectors: Electrical 203-574-8382 Mechanical 203-574-6855

Date of Application

Application Number (for tracking purposes)

Application for Mechanical Permit

PERMIT REQUESTED: (Choose One)

- Electrical, HVAC, Hood, Fire Alarm, Plumbing, Hood Suppression, Fire Sprinkler, Sewer, Fire Suppression

WORK CLASS: (Choose those that apply)

- Abandonment, Demolition, Repair, Addition, Install, Service Change, Alteration, New, Temporary Service, Change of Use, Relocation, Tenant Fit-out, Conversion, Remodel, Tenant Improvement, Disconnection, Removal

Building Permit Required YES NO

Building Permit #

ADDRESS (where work is being done):

Map/Block/Lot:

Applicant's Name: (person signing application)

Address, City/State/Zip, Phone #, Fax #, Email

Property Owner:

Address, City/State/Zip, Phone #, Fax #, Email

Contractor's Name:

Address, City/State/Zip, Phone #, Fax #, Email

CONTRACTOR RESPONSIBLE FOR SCHEDULING ALL INSPECTIONS

Type of License, License #, Certificate of Insurance, Insurance Expiration Date

Business Owner or Tenant:

Address, City/State/Zip, Phone #, Fax #, Email

CONSTRUCTION TYPE, OCCUPANCY CODE, DESIGN OCCUPANT LOAD

BUILDING TYPE: (Choose One)

- Residential, Commercial, Industrial, Other, # Units

CHANGE OF USE, BUILDING SPRINKLED

CERTIFICATE OF APPROVAL? YES NO

DESCRIPTION OF WORK:

PLUMBING

WORK ITEMS-Check all that apply to this application. Indicate # of each.

- Back-flow preventers, Bath Tubs, Bidets, Dishwashers, Drinking Fountains, Floor Drains, Gas Piping, Gas station piping, Grease Trap, Irrigation, Kitchen Sinks, Lavatories, Oil Separator, Plumbing, Radon systems, Sand Separator, Service Sinks, Shower Stalls, Swimming pools/tubs-commercial, Urinals, Washing Machines, Water Closet, Water Heater, Water heater pan and relief valve discharge, MUST be installed according to IPC. Sec. 504, Gas, Oil, Electric

SEWER

Call before you dig? YES NO Call before you dig # WORK ITEMS-Check all that apply to this application:

- Sanitary Sewer, Storm Sewer, Drywell, Oil Separator, Sand Separator, Grease Separator / FOG

FOOD, OIL & GREASE (FOG) SEPARATORS

All persons applying for a Sewer Permit for the installation of Food, Oil & Grease (FOG) Separators must file an application for a General Permit for the Discharge of Wastewater Associated with Food Preparation Establishments AT THE DEPARTMENT OF WATER POLLUTION CONTROL (203-574-8265).

Applicants signature on this application for permit will serve as proof of notice of this requirement.

OVER



ELECTRICAL

CRS# _____ #Meters: _____
 before service change: _____ after service change: _____

Main feeder: _____ **Sub-feeder:** _____
 AMPS: _____ AMPS: _____
 Calculated load: _____ Calculated load: _____
 Wire type: _____ Wire type: _____
 Wire size: _____ Wire size: _____

"WORK ITEMS"-Check all that apply to this application:

<input type="checkbox"/> Single family	Other
<input type="checkbox"/> Two family	<input type="checkbox"/> Above ground pool
<input type="checkbox"/> Multi-family	<input type="checkbox"/> A/C wiring
<input type="checkbox"/> Mixed Occupancy	<input type="checkbox"/> CCTV
<input type="checkbox"/> Commercial	<input type="checkbox"/> Cell sites
<input type="checkbox"/> addition	<input type="checkbox"/> Emergency generators
<input type="checkbox"/> add meter	<input type="checkbox"/> Emergency lighting
<input type="checkbox"/> add owner's meter	<input type="checkbox"/> Exit lights
<input type="checkbox"/> electric heaters	<input type="checkbox"/> Gas station pump
<input type="checkbox"/> install common area wiring	<input type="checkbox"/> Gas station tank
<input type="checkbox"/> install electric - gutted	<input type="checkbox"/> Heating oil dispenser
<input type="checkbox"/> new	<input type="checkbox"/> In-ground pool
<input type="checkbox"/> photovoltaic system	<input type="checkbox"/> Parking lot lights
<input type="checkbox"/> remodel	<input type="checkbox"/> Propane dispenser
<input type="checkbox"/> repair	<input type="checkbox"/> Sound systems
<input type="checkbox"/> security system	<input type="checkbox"/> Stand-by generators
Service Change	<input type="checkbox"/> Tele/data
<input type="checkbox"/> overhead	<input type="checkbox"/> Temperature controls
<input type="checkbox"/> underground	
<input type="checkbox"/> temporary service	
<input type="checkbox"/> water heaters	
<input type="checkbox"/> wire furnace	

Additional Information: _____

FIRE SPRINKLER

Fire hydrants YES NO
 Size of main: _____
 Fire Department connected (4" Storz): _____

"WORK ITEMS"-Check all that apply to this application:
 Chemical System Dry System Wet System

HVAC

AC/Refrigeration manufacturer _____
 AC/Refrigeration model # _____
 Heating manufacturer _____
 Heating model # _____
 Heating - type of firing _____
 Heating - type of system _____

"WORK ITEMS"-Check all that apply to this application:
 A/C Heating
 Fireplace - gas Refrigeration
 Gas Piping - HVAC Wood Stove

HOOD

Make up air _____
 Height _____
 Clearance from combustibles _____
 Metal Duct YES NO
 Type of Metal _____
 Termination above roof _____
 Size of canopy hood _____
 Type of grease filters _____

CHIMNEY

Flue lining system _____
 Gage of metal _____
 Type of metal _____
 Make up air _____
 Maximum clearance from combustibles _____
 Termination above roof _____
 Maximum height _____

"WORK ITEMS"-Check all that apply to this application:
 Masonry Chimney Metal Chimney

FIRE ALARM

"WORK ITEMS"-Check all that apply to this application:

Fire alarm : single family commercial
 two family mixed use
 multi-family

FIRE/HOOD SUPPRESSION

Fire Suppression system type: _____
 System capacity (gallons) _____ Type of pipe _____
 Size of risers: _____ # of risers: _____

ESTIMATED COST: \$ _____

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as an authorized agent and we agree to conform to all applicable laws of this jurisdiction.

APPLICANT'S NAME : _____
 (please print)

SIGNATURE: _____

For Inspector's Use Only - Do Not Write Below This Line:

Reviews Required?	Permit Fee: \$ _____
Fire Marshal <input type="checkbox"/> Yes <input type="checkbox"/> No	State Fee: \$ _____
Water Pollution Control <input type="checkbox"/> Yes <input type="checkbox"/> No	CA Fee: \$ _____
Application Reviewed - OK to Issue Permit:	Penalty Fee: \$ _____
(Authorizing Inspector's Signature)	Fire Marshal Fee: \$ _____
rvsd. 9/4/13	WPC Fee: \$ _____
	Total Fee Collected: \$ _____

