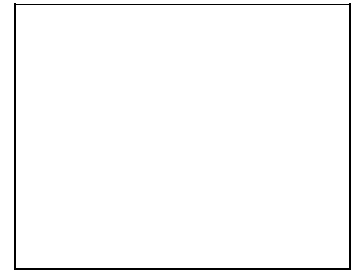


Town of West Hartford **ELECTRICAL, PLUMBING, HVAC and MECHANICAL** Permit Application

Application Date: ___/___/21 Application #PR___ 2021_____



Application Type: Choose One Only

Electrical___ *Fire Alarm___ *Ansul System___ *Sprinkler___
CRS#_____

Grease Exhaust Hood_____ () **Noted permits require Fire Marshal approval.**

Received By: _____

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

_____ **I have verified the flood level rims of the plumbing fixtures proposed to be installed are ABOVE the elevation of the manhole cover of the next upstream manhole in the public sewer. If located below the flood level rim, a backwater valve will be installed to protect the proposed fixtures in accordance with P3008.11 of the 2015 IRC or Section 715 of the IPC.**

Occupancy Type: Check One Only

_____ One Family Home _____ Two Family Home _____ Three Family Home
_____ Other (Please describe such as retail, business, etc.)_____

Description of Work _____

Value of Work \$ _____ Estimate sq footage of work area if applicable _____
Permit Fee \$ _____ Check # _____

JOB LOCATION: _____
NAME OF TENANT IF A BUSINESS: _____

HISTORIC DISTRICT: **Y**___ or **N**___. If the property is in a Historic District, we will forward this form to the Historic Commission.

Property Owner Name _____

Property Owner Address _____ City _____ State _____ Zip Code _____

Phone _____ Fax _____ Cell _____ Email Address _____

Applicant's Name _____

Business Name _____ Registration/Lic# _____ Exp Date _____

Address _____ City _____ State _____ Zip Code _____

Phone _____ Fax _____ Cell _____ Email Address _____

Contractor's Name (if different than applicant) _____

Business Name _____ Registration/Lic# _____ Exp Date _____

Address _____ City _____ State _____ Zip Code _____

Phone _____ Fax _____ Cell _____ Email Address _____

Additional Information for 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 2018 CT Code IPC 305.8 for commercial and 2018 CT Code IRC 2603.1 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 manufacturer's latest installation manual for complete required details.

Additional Information for HVAC Applications:

Please note that Heat Loss and Heat Gain (cooling) sheet must accompany application per 2018 CT IMC 312.1 or 2018 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 _____

Distance from property line: _____ (per manufacturers installation instructions.)

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.

PLEASE CHECK ONE OF THE BELOW BOXES:

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 started until the applicant has received the signed approved permit.

Please Note: If the Historic District Commission has designated this property as a historic property, the Town of West Hartford will forward this application to the Commission as part of the statutorily required review process.

Signature of Property Owner

Signature of Authorized Agent

Print Name of Property Owner

Print Name of Authorized Agent

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 2018 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 approval.

Fire Approval _____ *Date of Fire Approval* _____

Conditions of Fire Approval _____

Doc: Mechanical Application

Revised: 01/2020

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