



DEPARTMENT OF INSPECTION

26 Kendrick Ave. 1st floor - Waterbury, CT 06702
(203) 574-6832

Date of Application

Application Number
(for tracking purposes)

Application for Mechanical Permit

PERMIT REQUESTED: (Choose One)

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

WORK CLASS: (Choose those that apply)

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

Building Permit Required YES NO

Building Permit # _____

Applicant's Name: _____
Address: _____
City/State/Zip: _____
Phone #: _____

LOCATION OF WORK:
Map/Block/Lot: _____

Contractor's Name: _____
Address: _____
City/State/Zip: _____
Phone #: _____

Owner's Name: _____
Address: _____
City/State/Zip: _____
Phone #: _____

Type of License: _____
License #: _____
Certificate of Insurance ? Yes No
Insurance Expiration Date: _____
Worker Compensation Form 7A, 7B, 7C? Yes No

Architect's Name: _____
Address: _____
City/State/Zip: _____
Phone #: _____

BUILDING TYPE: (Choose One)

- Residential
- Commercial
- Industrial
- Other _____

CHANGE OF USE: YES NO

CONSTRUCTION TYPE: _____

OCCUPANCY CODE: _____

BUILDING SPRINKLED: YES NO

DESIGN OCCUPANT LOAD: _____

ENTERPRISE ZONE: YES NO

Certificate of Approval (CA) Required

DESCRIPTION OF WORK: _____

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

<input type="checkbox"/> Back-flow preventers	<input type="checkbox"/> Oil Separator
<input type="checkbox"/> Bath Tubs	<input type="checkbox"/> Plumbing
<input type="checkbox"/> Bidets	<input type="checkbox"/> Radon systems
<input type="checkbox"/> Dishwashers	<input type="checkbox"/> Sand Separator
<input type="checkbox"/> Drinking Fountains	<input type="checkbox"/> Service Sinks
<input type="checkbox"/> Floor Drains	<input type="checkbox"/> Shower Stalls
<input type="checkbox"/> Gas Piping	<input type="checkbox"/> Swimming pools/ tubs- commercial
<input type="checkbox"/> Gas station piping	<input type="checkbox"/> Urinals
<input type="checkbox"/> Grease Separator (underground)	<input type="checkbox"/> Washing Machines
<input type="checkbox"/> Grease Trap	<input type="checkbox"/> Water Closet
<input type="checkbox"/> Irrigation	<input type="checkbox"/> Water Heater
<input type="checkbox"/> Kitchen Sinks	_____ Gas
<input type="checkbox"/> Lavatories	_____ Oil
	_____ Electric

SEWER -please answer the following:
 Call before you dig? YES NO
 Call before you dig # _____
"WORK ITEMS"-Check all that apply to this application:

<input type="checkbox"/> Sanitary Sewer	<input type="checkbox"/> Oil Separator
<input type="checkbox"/> Storm Sewer	<input type="checkbox"/> Grease Separator
<input type="checkbox"/> Drywell	<input type="checkbox"/> Sand Separator

FIRE SPRINKLER -please answer the following:
 Fire hydrants YES NO Chemical System
 Size of main: _____
 Fire Department connected (4" Storz): _____
"WORK ITEMS"-Check all that apply to this application:
 Wet System

FIRE SUPPRESSION -please answer the following:
 Fire Suppression system type: _____
 System capacity (gallons) _____ Type of pipe _____
 Size of risers: _____ # of risers: _____
"WORK ITEMS"-Check all that apply to this application:
 Dry Chemical Fire Suppression System

FIRE ALARM
"WORK ITEMS"-Check all that apply to this application:
 Fire alarm : single family commercial
 two family mixed use
 multi-family

ELECTRICAL -please answer the following:
 CRS# _____ #Meters: _____

HVAC -please answer the following:
 AC/Refrigeration manufacturer _____



before service change: _____ after service change: _____

Main feeder:

AMPS: _____
Calculated load: _____
Wire type: _____
Wire size: _____

Su-Sub-feeder:

AMPS: _____
Calculated load: _____
Wire type: _____
Wire size: _____

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

Single family

- addition
- electric heaters
- new
- photovoltaic system
- remodel
- repair
- Service Change*
 - overhead
 - underground
- temporary service
- water heaters
- wire furnace

Two family

- A/C wiring
- addition
- electric heaters
- new
- photovoltaic system
- remodel
- repair
- security system
- Service Change*
 - overhead
 - underground
- temporary service
- water heaters
- wire furnace

Multi-family

- addition
- add owner's meter
- electric heaters
- install electric heaters
- install common area wiring
- install electric - gutted
- new
- remodel
- repair
- security system
- Service Change*
 - overhead
 - underground
- temporary service
- water heaters
- wire furnace

Mixed Occupancy

- addition
- add meter
- electric heaters
- new
- photovoltaic
- remodel
- repair
- security system
- Service Change*
 - overhead
 - underground
- temporary service
- water heaters
- wire furnace

Commercial

- addition
- add meter
- electric heaters
- new
- photovoltaic
- remodel
- repair
- security system
- Service Change*
 - overhead
 - underground
- temporary service
- water heaters
- wire furnace

Other

- Above ground pool
- A/C wiring
- CCTV
- Cell sites
- Emergency generators
- Emergency lighting
- Exit lights
- Gas station pump
- Gas station tank
- Heating oil dispenser
- In-ground pool
- Parking lot lights
- Propane dispenser
- Sound systems
- Stand-by generators
- Tele/data
- Temperature controls

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 -please answer the following:
 Make up air _____
 Maximum height _____
 Maximum clearance from combustibles _____
 Metal Duct YES NO
 Type of Metal _____
 Termination above roof _____
 Size of canopy hood _____
 Type of grease filters _____
"WORK ITEMS"-Check all that apply to this application:
 Hood Hood Suppression

CHIMNEY -please answer the following:
 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

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?
Fire Marshal Yes No

Application Reviewed - OK to Issue Permit:

(Authorizing Inspector's Signature)

Permit Fee: \$ _____
State Fee: \$ _____
Total Fee Collected: \$ _____

Cash/Check # _____

