



Town of Groton Mechanical Permit Application

(Heating, Air-Conditioning, Duct Work,
Gas Piping, etc.)

Return to:
Inspection Services
134 Groton Long Point Road
Groton, CT 06340-4873
Phone: (860) 446-5982
Fax: (860) 448-4094

Permit No. _____ (For Office Use Only)
Fees: Mechanical: _____ State: _____ Total: _____

- Residential Property Commercial Property New Building Existing Building

Value of Project (Cost of Materials and Labor): _____

Property Location (Street Address): _____

Owner(s) Name (as it appears in Land Records) _____

Mailing Address: _____ Telephone: _____

Town: _____ State _____ Zip _____ E-mail: _____

Contractor: _____ Company Name: _____

Mailing Address: _____ Telephone: _____

Town: _____ State _____ Zip _____ E-mail: _____

Description of Proposed Work: _____

Manual J or D or S Provided (as required by code) Yes ____ No ____

Type of Heating System NEW REPLACEMENT - Hot Water Steam Forced Air Electric

Boiler/Furnace - Make _____ Model _____ BTU Rating: _____ Gas Fired Oil Fired

Other

Radiation Make, Model and Net Rating BTU/HR:

- Chimney Flue Size Type Water Heater Domestic Coil Boiler

OIL TANK SIZE _____ LOCATION: Inside Outside

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, codes, regulations and ordinances. All information contained within is true and accurate to the best of my knowledge and belief.

_____ PRINT NAME _____ Telephone _____ Contractor's License #

_____ SIGNATURE in Ink of Owner or Authorized Agent _____ Application Date

_____ Building Official	_____ Completed Application Date
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This permit shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance. Refunds will be subject to the refund policy.