

APPLICATION FOR HEATING – AIR CONDITIONING PERMIT

**TOWN OF HADDAM
BUILDING DEPARTMENT
30 FIELD PARK DRIVE
HADDAM, CT 06438
(860) 345-8531 FAX (860) 345-5169**

PERMIT # _____ ESTIMATED COST _____ FEE _____ CHECK # _____

LOCATION OF PROPERTY _____

OWNER OF PROPERTY _____

EMAIL: _____ PHONE # _____

APPLICANT: _____ LICENSE # _____

ADDRESS: _____

PHONE # _____ CELL # _____

E-MAIL _____ Fax Number: _____

New Building _____ Existing Building _____ Intended Use of Building: Residential
 Commercial
 Industrial
 Other: _____

Type of Installation: Hot Water Sprinkler Steam
 Ventilation Hot Air Air Conditioning
 Other: _____

DESCRIPTION OF PROPOSED INSTALLATION: _____

Heat loss report for new houses; Load calculation with automatic transfer switch on generators
All work covered by this application has been authorized by the owner or agent of this property and will be done according to State Codes.

MAP: _____ LOT: _____ Applicant's (Print Name): _____

Date: _____ Applicants Signature: _____

Approved Disapproved

Town Building Official Date

Date Stamp