



TOWN OF EASTON MECHANICAL PERMIT APPLICATION

SELECT WORK TYPE

- ☐ HVAC ☐ FIREPLACE/ LINER/ WOOD BURNING ☐ HOOD / DUCT
☐ OTHER _____

This Section to be Completely Filled Out by Applicant

NAME

PERMIT #

ADDRESS

CONTACT #

EMAIL

CONTRACTOR NAME

COMPANY NAME

COMPANY ADDRESS

CONTACT #

CELL #

EMAIL

LICENSE TYPE

LICENSE #

EXPIRATION DATE:

Work type: Residential ☐ Commercial ☐ Copy of Worker Comp Ins. ☐ 7B (Must be Notarized)

Work Description:

JOB COST:

I, THE UNDERSIGNED, in accordance with the Building Code of the State of Connecticut, hereby applies for a permit to perform mechanical work as listed herein and agrees to conform strictly to the Building Code and to give notice when the work is ready for roughing and final inspections.

Print Name

Signature

Date

OFFICE USE ONLY

Estimated Job Cost: _____

PERMIT FEE	\$
ADMIN. FEE	\$
TOTAL	\$

Building Official Signature

Date