

Application for HVAC Permit

Abington Township, PA

1176 Old York Road, Abington PA 19001, Fax: 215-884-8271, Telephone: 267-536-1000



Property Information

Owner Information

Property Owner			
Job Location	Address		
	City/State/Zip		
	Email	Telephone	
Lot <input type="text"/>	Block <input type="text"/>	Parcel # <input type="text"/>	Unit # <input type="text"/>
	Lot Size <input type="text"/>	Zoning <input type="text"/>	Ward <input type="text"/>

Application Information

Permit #	<input type="text"/>	Applicant Name	<input type="text"/>
Date	<input type="text"/>	Applicant Address and Phone #	<input type="text"/>
Permit Fee	<input type="text"/>	Contractor Name	<input type="text"/>
Payment Type	<input type="text"/>	Contractor Address and Phone #	<input type="text"/>
Receipt Number	<input type="text"/>	Contractor email	<input type="text"/>
If this is a sub-permit of a general permit, please enter the general permit number here. (If this is a stand-alone permit ignore this field.)		Contractor PA Reg #	<input type="text"/>

By signing this application, the applicant certifies that all information on this application is correct and the work will be completed in accordance with the approved construction documents and PA Act 45 (Uniform Construction Code) and any additional approved building code requirements adopted by the Municipality.

Applicant Signature _____

1. Circle: new or re-installation? _____
2. Circle: air conditioner, heater, hot water heater or other? _____
3. Appliance location? _____
4. What is the BTU input? _____
5. Circle fuel type: natural gas, oil, electric or other? _____
6. Is the building construction considered unusually tight construction? If yes, then skip combustion air section. _____

Combustion Air Section:

7. Total BTUs of all appliances in room. _____
8. Usage of room from which combustion air is drawn? _____
9. Combustion airspace required amount (50cf per 1000btu) _____
10. Size of openings (add louver restriction, wood (sq. in X 4) / metal (sq. in X 1.33) _____

Chimney (gas only) Section:

11. No. of appliances connected to chimney and BTU of each unit _____
12. Chimney connector height of each appliance _____
13. Chimney connector lateral measurement _____
14. List of appliances as fan assisted or natural vent _____
15. Vent connector material and diameter for each appliance (single wall or B-vent) _____
16. Height of chimney above highest appliance _____
17. Amount of 90 or 45 degree bends per connector _____
18. Interior chimney/exterior chimney _____
18. Chimney linear material _____

Manufacturer's clearances must be observed. All installations must comply with the Int. Fuel Gas & Mechanical Codes or Manufacturer's require.

SPECS MUST ACCOMPANY PERMIT APPLICATIONS

Remarks:

Estimated cost of the job?