

TOWN OF PATTERSON
1142 Route 311, P.O. Box 470 Patterson, NY 12563
Phone (845) 878-6500 Fax (845) 878-2019
**PERMIT APPLICATION FOR INSTALLATION & OR ALTERATION OF
NATURAL GAS, PROPANE OR FUEL OIL**

Installation Contractor: _____ PC License # _____

Company Address: _____

Company Phone # _____ Cell # _____ Email: _____

Job Location:

Owner Name: _____ Tax Map # _____

Address: _____ Phone # _____

Type of Structure:

Single Family Home _____ Commercial/Industrial _____ Multiple Family Home _____ Other _____

Gas Servicing:

Boiler (Heating System) _____ Furnace _____ Hot Water Heater _____ Range _____ Stove _____ Dryer _____

Bar-B-Que _____ Air Handler _____ Roof Units _____ Fireplace _____ Generator _____ Other _____

Liquid Propane _____ Natural Gas _____ Fuel Oil _____

Pipe: Underground _____ Above Ground _____

Tank Removal: Underground _____ Above Ground _____ GALLONS _____

Tank Installation: Underground _____ Above Ground _____ GALLONS _____

Estimated Cost of Construction: \$ _____

Existing permits or permits for new construction where fuel gas installation is an accessory part of the permit:

Residential - \$50.00 (up to 5 fixtures) Additional Fixtures \$10.00 each

Commercial / Industrial - \$100.00 (up to 5 fixtures) Additional Fixtures \$100.00 each

New Application not associated with any other permit:

<u>Residential:</u>	application fee: \$75.00	<u>Commercial:</u> \$75.00
	Permit fee \$50.00	\$100.00
	C/O \$50.00	\$50.00
	TOTAL \$175.00	\$225.00

Additional Fee where removal AND installation is involved:

Underground Tanks – EACH - \$100.00 Above Ground – EACH - \$25.00

Re-Inspection Fees: Residential: \$25.00 Commercial: \$50.00

I certify that all equipment will be installed and work will be performed in accordance with all Federal, State and Local codes.

OWNER'S SIGNATURE _____

Signature of Company Representative: _____ Date: _____

Office use only: Date Received _____ Received By: _____

Fee: _____ Check _____ Cash _____ Receipt #: _____

OWNER MUST SIGN APPLICATION OR SUPPLY A LETTER OF AUTHORIZATION.

Rough Inspection Date _____

Tag # _____

Year _____ Pass Fail

TOWN OF PATTERSON
1142 Route 311, P.O. Box 470 Patterson, NY 12563
Phone (845) 878-6500 Fax (845) 878-2019
PRESSURE TEST/LEAK TEST AFFIDAVIT
NATURAL GAS, PROPANE OR FUEL OIL

Installation Contractor: _____ PC License # _____

Company Address: _____

Company Phone # _____ Cell # _____ Email: _____

Job Location:

Owner Name: _____ Tax Map # _____

Address: _____ Phone # _____

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Bar-B-Que _____ Air Handler _____ Roof Units _____ Fireplace _____ Generator _____ Other _____

Liquid Propane Natural Gas Fuel Oil

Pipe Installation: Underground _____ Above Ground _____

Tank Removal: Underground _____ Above Ground _____ GALLONS _____

Tank Installation: Underground _____ Above Ground _____ GALLONS _____

I, _____, certify that header and gas piping has been tested for (1) hour with 25 pounds of air without any drop in pressure.

Or, I have tested same as above for (1) hour with a Magnehelic gauge (0 to 15 psi, testing to equal 5 psi minimum) or a Magnehelic gauge (0 to 150") in water column, testing to equal 5 psi.

Company Installer's Signature

Date

Building Inspector

Date