

Stillwater Township Application for Heating / Air conditioning Permits

Jack Kramer, Building Official
 10090 Oakgreen Ave. N.
 Stillwater, MN. 55082
 Phone # 651-351-5051

Date _____ Structure Used As _____

Owner _____ Phone # _____

Site Address _____

Contractor _____

Address _____

Phone # _____

Est. Cost \$ _____

Job Description _____

_____ Oil _____ Gas (Natural or LP) _____ Wood

Scope of Work - Check all that apply

- | | | | |
|-----------------------|---------------------------|-------------------|---------------------------|
| _____ Furnace | _____ Hot Water Boiler | _____ Gas Piping | _____ Gas Fireplace |
| _____ Air Conditioner | _____ Refrigeration | _____ Gas Log | _____ Man. Wood Fireplace |
| _____ Ductwork | _____ Ventilation/Exhaust | _____ Log Lighter | _____ Misc. Other |

Equipment that will be installed:

Type of equipment	Manufacturer	Model No.	Fuel	Flue Dia.	Input/BTU's	CFM	Tons

Air to Air Exchanger Heat/Energy (circle one) Recovery Ventilator

Manufacturer	Model No.	Defrost Deduction	Rated low capacity	Rated high capacity
		%	cfm	cfm

Provide the name of the electrical contractor doing the wiring: _____

The undersigned agrees to do all work in conformance with Township Ordinances and herewith declares that all facts and representations on this application are true and correct.

THE UNDERSIGNED AGREES TO NOTIFY THE INSPECTIONS DEPT. WHEN READY FOR INSPECTIONS.

Signed _____ Date: ____ / ____ / ____

OFFICE USE ONLY ORSAT test required Yes _____ No _____
 APPROVED / DISAPPROVED By: _____ Date ____ / ____ / ____
Official

Permit # _____ Date Paid ____ / ____ / ____ Check # _____