

**CITY OF NEWBURGH
BUILDING INSPECTORS OFFICE
PERMIT FOR INSTALLATION OF GAS BURNERS,
OIL BURNERS & AIR CONDITIONERS**

Permit Number: _____ Date _____

Address of Installation: _____

Owners Name: _____

Manufacturers Name: _____

Model Name: _____ BTU: _____

Model Number: _____ Installation Cost: _____

Kind of Fuel Recommended for Burner: _____

Gas Designed or Conversion: _____

Size of Tank: _____ Gauge: _____

Where is Tank to be Located? _____

Cellar: _____ Outside: _____

Note: If tank is to be located outside, a plot plan must be submitted showing exact placement.

Has Burner Been Approved by A.G.A.? _____

Has Burner Been Approved by N.B.F.U.? _____

Name of Electrician: _____

License Number: _____ Permit Number: _____

Name of Plumber: _____

License Number: _____ Permit Number: _____

Applicant Name: _____

Firm: _____ Phone: _____

Signature: _____

Approved By: _____

Fee: _____ Receipt Number: _____