

# MASSACHUSETTS PERMIT APPLICATION FOR GAS FITTING

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Oak Bluffs, Massachusetts		Department Use Only
Owner's Name		
Location		PERMIT
Map	Lot	Type of Occupancy
New		Renovation
Replacement		DATE
Is this application in conjunction with a building permit?		Yes No B.P. #

PROPOSED WORK	SUB BASEMENT	BASEMENT	FIRST FLOOR	SECOND FLOOR	THIRD FLOOR	FOURTH FLOOR	FIFTH FLOOR
RANGES							
HEATER RANGES							
OVENS							
HEATIGN BOILERS							
FURNACES							
UNIT HEATERS							
WATER HEATERS							
DRYERS							
GAS GENERATORS							
LABORATORY COCKS							
CONVERSION BURNERS							
ROOF TOP UNITS							
VENTED ROOF HEATERS							
DIRECT ROOM HEATERS							
POOL HEATERS							
DRINKING FOUNTAINS							
OTHER							
PLEASE DISCRIBE OTHER							

Installing Company		PLEASE CIRCLE ONE Corporation Partnership Firm/Company PLEASE CIRCLE ONE Master Journeyman
Address		
Telephone		
Name of Licensed Plumber or Gas Fitter		
Signature of Licensed Plumber or Gas Fitter		License Number

INSURANCE COVERAGE	
I have current liability insurance or equivalent which meets the requirements of MGL Ch 142	
If yes, please circle which type of coverage.	
Liability Insurance	Other Type of Indemnity
OWNER'S INSURANCE WAIVER	
I am aware that the licensee does not have the insurance coverage required by Chapter 142 of the Massachusetts General Laws, and that my signature on this permit application waives this requirement	
Signature of Owner or Owner's Agent	
PLEASE CIRCLE ONE Owner Agent	