

FUEL PIPING APPLICATION

Date: _____ Permit No.# _____

THIS PERMIT IS HERE BY ISSUED TO: Permit Fee:\$ _____

Fuel Piping Contractor: _____ Phone# _____

Address: _____

Email: _____ NC Fuel Piping License #: _____

Project Address: _____ Total Sq. Ft. _____

Owner of Project: _____

Address: _____

TOTAL PROJECT COST: \$ _____
City State Zip Code

OCCUPANCY TYPE:(CHECK ONE) RESIDENTIAL COMMERCIAL

WORK BEING PERFORMED WILL BE INTERIOR ONLY EXTERIOR ONLY BOTH
 Be advised if work is being done on the exterior, a separate zoning permit is required.

Check One: Replacement: _____ Remodel: _____ Repair: _____ New Installation: _____

| INSTALLATION OF: | NUMBER OF | BTU RATING & FUEL TYPE |
|---|-----------|------------------------|
| <input type="checkbox"/> # WARM AIR FURNACES (GAS PACK, GAS OR OIL FURNACE) | | |
| <input type="checkbox"/> FUEL APPLIANCES | | |
| <input type="checkbox"/> FUEL LINES | | |
| <input type="checkbox"/> TANK INSTALLATIONS & SIZE (OIL OR LP) | | |
| <input type="checkbox"/> GAS LINES | | |
| <input type="checkbox"/> OTHER (SPECIFY) | | |

****REQUIRED WITH YOUR APPLICATION:**

1. Line diagram of fuel piping system. (size and length)
2. System pressure. (LP & Natural Gas)
3. Calculation of system sizing.
4. Generators: need aerial view of property or survey showing gas line & tank location

 Contractor/Applicant Printed Name/Signature