BOROUGH OF PARKESBURG

315 West First Avenue, Building 1, Parkesburg, PA 19365
610-857-2616 • fax 610-857-1102

APPLICATION FOR HEATING, AIR CONDITIONING & FUEL TANK PERMIT

Owner/Applicant: _____
Name Address Phone

Location Address: _____

Tax Parcel No: _____ New Building: _____ Existing Building: _____

Use of Property: _____

Description of Work: _____

HEATING

Type of Fuel: _____ Cost of Installation: _____

Name of Unit: _____ Mfg. by: _____

Capacity of Unit (BTU's): _____ Output: _____

AIR CONDITIONING

Capacity of Unit (BTU's): _____ Cost of Installation: _____

Distance from property line: _____ Name of Unit: _____

Mfg. by: _____

FUEL TANK

Capacity of Tank: _____ Type of Fuel: _____

Cost of Installation: _____

Owner/Lessee: _____
Name Address Phone

Contractor: _____
Name Address Phone

➜ ATTACH PLOT PLAN SHOWING LOCATION OF TANK ←

The undersigned agrees to conform to all applicable laws of the Borough of Parkesburg

Applicant's Signature: _____ Date: _____

Approved by: _____ Date: _____

Permit No: _____ Fee: _____

Neil D. Vaughn, B.C.O
ARRO Consulting, Building Inspector
Phone: 610-857-2616 Fax: 610-857-1102