



The City of Waterbury  
**DEPARTMENT OF INSPECTION**  
 26 Kendrick Ave  
 Waterbury, CT 06702  
 (203) 574-6855

**PERMIT NUMBER:**

Date: \_\_\_\_\_

**Application for Hood/Chimney Permit**

PLEASE PRINT LEGIBLY

**Applicant:**  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_

**LOCATION OF WORK:**  
 \_\_\_\_\_

**Owner:**  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_

License Number: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Owner's Phone: \_\_\_\_\_

Building Type:	Masonry Chimney	_____
<input type="radio"/> Commercial	Metal Chimney	_____
<input type="radio"/> Industrial	Flue Lining System	_____
<input type="radio"/> Residential	Metal Duct	_____
# of Families? _____	Size of Canopy Hood	_____
Type of Work:	Type of Metal	_____
<input type="radio"/> Remodel	Gage of Metal	_____
<input type="radio"/> Addition	Type of Joists	_____
<input type="radio"/> Repairs Only	Maximum Height	_____
<input type="radio"/> New Home	Termination above Roof	_____ (in.)
<input type="radio"/> Other _____	Quality of Exhaust	_____
	Quality of Make-up Air	_____
	Type of Grease Filter	_____
	Height above Cooking Service	_____
	Maximum Clearance from Combustibles	_____ (in.)

**ESTIMATED COST: \$** \_\_\_\_\_

*I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as an authorized agent and we agree to conform to all applicable laws of this jurisdiction.*

**PRINT NAME:** \_\_\_\_\_ **SIGNATURE:** \_\_\_\_\_

Do not write below this line - For Office use Only

**REQUIRED APPROVAL - FIRE MARSHAL:** \_\_\_\_\_

Permit Fee: \$ \_\_\_\_\_ Building Permit Required?  YES  NO  
 State Ed Fee: \$ \_\_\_\_\_ Permit#: \_\_\_\_\_  
 Penalty Fee: \$ \_\_\_\_\_ Issued by: \_\_\_\_\_  
**TOTAL \$** \_\_\_\_\_ Mechanical Inspector

