

APPLICATION TO INSTALL FUEL BURNING EQUIPMENT IN BUILDINGS

PERMIT OPERATIONS DIVISION

1100 4th St., SW, Washington DC, 20024

Date: _____

FB **FUEL BURNING EQUIPMENT PERMIT APPLICATION**
APPLICATION MUST BE COMPLETED IN ITS ENTIRETY

Address of Work:	Suite/Room /Floor:	Square:	Building Permit #:
		Lot:	
Owner of Building/Business:	Owner's Address:		Phone:

- TYPE OF WORK:**
- a. New
 - b. Replacement
 - c. Remodeling
 - d. Repair

PROPOSED USE (CURRENT USE IF NO CHANGE)		
A. Single Family	E. Restaurant	I. Office
B. Two Family Flat	F. Store	J. Garage
C. Rooming House	G. Shop	K. Other (specify)
D. Apartment	H. Theatre	

FUEL BURNING PERMIT

No. to be installed	
Gross Rating	
Fuel Type	
Steam Pressure (PSI)	
Output Capacity	

OTHER:

Heating Contractor: _____ License No.: _____ Contractor Address: _____ _____ _____	Authorized Agent Signature : _____ Phone: _____
	<p>TO REPORT WASTE, FRAUD OR ABUSE BY ANY DC GOVERNMENT OFFICE OR OFFICIAL, CALL THE INSPECTOR GENERAL AT 1-800-521-1639</p> <p>ALL CALLS ARE CONFIDENTIAL</p>