



Permit Number: _____

Talbot County Office of Permits and Inspections
215 Bay Street, Suite 3
Easton, Maryland 21601
Phone: 410-770-6840
Inspections: 410-770-6849
Fax: 410-770-6843

Checklist for Fuel Gas Permit
THIS OFFICE DOES NOT EXCEPT CASH

Please check the box that applies to your project:

- Outside Work Only
- Inside Work Only
- Both Inside and Outside Work

Flood Zone (Check all that apply): 0.2% (X-Shaded) ____ A ____ AE* ____ AO ____ V ____
VE* ____

*Base Flood Elevation Required from Mapped Special Flood Hazard Area _____

Applicants Signature

Date

This form is not a duplicate, please complete attached application.



Check Number: _____

Talbot County Department of Planning and Permits
 215 Bay Street, Suite 2
 Easton, Maryland 21601
 410-770-6840

Fuel Gas Permit Application

Date Received: _____ Building Permit No.: _____ Fuel Gas Permit No.: _____

I _____ certify the property owner has authorized the applicant to do the work described and the applicant agrees to complete this work in accord with all applicable codes. By this application the applicant requests permission to do the work, as listed, on the property located at the address below.

Property Owner(s) Name: _____
 Project Address: _____
 Project Description: _____

Fixture Summary and Location

Check one that applies to table below: _____ Propane _____ Natural Gas

Mechanicals	Cellar	Floor			Total
		First	Second	Third	
Boiler					
Dryer					
Fireplace					
Furnace					
Generator					
Grill					
Range					
Water Heater					
Totals					

<u>Office Use Only:</u>		
<u>Residential</u>	<u>Fee</u>	<u>Charges</u>
All Fixtures	\$70.00	_____
Manufactured Dwelling Re-Inspection Fee	\$70.00 \$40.00	_____ _____
Total:		_____
<u>Non-Residential</u>	<u>Fee</u>	<u>Charges</u>
All Fixtures	\$70.00	_____
Re-Inspection Fee	\$40.00	_____
Total:		_____
Issued by: _____		

Contractor(s) Name: _____
 Company Name: _____
 Business Address: _____
 Phone Number: _____ Email Address: _____
 Master Gas Fitter License No.: _____ Expiration Date: _____
 County License No.: _____ Master Name (Printed): _____

_____ Masters Signature _____ Date

White—Finance Office Copy Canary --P&I Office Copy

**THIS PERMIT CARD AND ANY
 SUPPORTING DOCUMENTS
 RELATING TO YOUR PERMIT
 MUST BE KEPT ON SITE**