



# Town of New Castle

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## APPLICATION FOR HVAC PERMIT

**HVAC Permit No:** \_\_\_\_\_

**BP No:** \_\_\_\_\_

The following items must be submitted for initial review unless waived by the Building Inspector

- One Application for HVAC Permit
- Two (2) copies of plans and specifications for the project prepared by a Design Professional
- Workers' Compensation Insurance – with the Town of New Castle as Certificate Holder
- Certification that the installation complies with the Energy Conservation Construction Code of New York State
- Note that any electrical or plumbing work requires a separate permit

(DO NOT WRITE ABOVE LINE – FOR OFFICIAL USE ONLY)

Property Owner: \_\_\_\_\_

Date Filed: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Property Location: \_\_\_\_\_

Section: \_\_\_\_\_ Block : \_\_\_\_\_ Lot : \_\_\_\_\_ Zoning District: \_\_\_\_\_

- |  |  |   |                               |
|--|--|---|-------------------------------|
| <input type="checkbox"/> New Construction    | <input type="checkbox"/> Single Family | <input type="checkbox"/> Accessory Building | <input type="checkbox"/> Pool |
| <input type="checkbox"/> Basement Alteration | <input type="checkbox"/> Addition      | <input type="checkbox"/> Multi-family       |                               |
| <input type="checkbox"/> Alteration          | <input type="checkbox"/> Commercial    | <input type="checkbox"/> Other _____        |                               |

Company Address: \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

Description of work: \_\_\_\_\_

**Cost of construction:** \$ \_\_\_\_\_ **Fee:** \_\_\_\_\_

**The fee is \$100 for 1<sup>st</sup> \$1,000 in construction cost; \$15 each additional \$1,000 - Residential**  
**The fee is \$150 for 1<sup>st</sup> \$1,000 in construction cost; \$18 each additional \$1,000 - Commercial**

Signature of Applicant: \_\_\_\_\_

Approved: \_\_\_\_\_

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