



# City of Belle Isle

1600 Nela Avenue, Belle Isle, FL 32809  
Tel 407-851-7730 \* Fax 407-240-2222 \* [www.cityofbelleislefl.org](http://www.cityofbelleislefl.org)

## APPLICATION FOR GAS PERMIT

**WARNING TO OWNER:** YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

DATE: \_\_\_\_\_

PERMIT NUMBER \_\_\_\_\_

PLEASE PRINT

The undersigned hereby applies for a permit to make: (Indicate)

Natural  Liquefied Petroleum Gas  installations as indicated below on property.

Project Address \_\_\_\_\_, Belle Isle FL \_\_\_\_ 32809 \_\_\_\_ 32812

Property Owner \_\_\_\_\_ Phone \_\_\_\_\_

Property Owner's Mailing Address \_\_\_\_\_

Tax I.D. Number: Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ Sub \_\_\_\_\_ B&L \_\_\_\_\_

Legal Description: Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Class of Building: Old  New  Type of Building: Residential  Commercial  Other

Type of Work: New  Alteration  Addition  Repair

# GAS OUTLETS \_\_\_\_\_

DELIVERY PRESSURE \_\_\_\_\_

**APPLIANCES:**

TOTAL # BTU'S \_\_\_\_\_

**PLEASE ATTACH PIPING PLAN/SKETCH WITH GAS CALCULATIONS WITH EVERY PERMIT  
GENERATOR INSTALLATION SHOULD INCLUDE INLET PRESSURE AND SUPPLY SPECIFICATIONS**

\*ALL VENTING AND COMBUSTION AIR SHALL BE THE RESPONSIBILITY OF THE PERMIT HOLDER,  
AND WILL BE INSTALLED AT THE ROUGH-IN STAGE, INDICATE ALL DIRECT VENT/POWER VENT APPLIANCES  
IN SPECIAL COMMENTS\*

BOILER \_\_\_\_\_ BTU \_\_\_\_\_ each  
DRYER \_\_\_\_\_ BTU \_\_\_\_\_ each  
FIREPLACE \_\_\_\_\_ BTU \_\_\_\_\_ each  
FURNACE \_\_\_\_\_ BTU \_\_\_\_\_ each  
RANGE \_\_\_\_\_ BTU \_\_\_\_\_ each  
WATER HEATER \_\_\_\_\_ BTU \_\_\_\_\_ each  
GRILLS \_\_\_\_\_ BTU \_\_\_\_\_ each  
POOL HEATER \_\_\_\_\_ BTU \_\_\_\_\_ each  
SPA \_\_\_\_\_ BTU \_\_\_\_\_ each

SPECIAL COMMENTS(\*)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

MISCELLANEOUS:

\_\_\_\_\_ BTU \_\_\_\_\_ each  
\_\_\_\_\_ BTU \_\_\_\_\_ each  
\_\_\_\_\_ BTU \_\_\_\_\_ each

LABOR & APPLIANCE COST ESTIMATED \$ \_\_\_\_\_

3% FL SURCHARGE \$ \_\_\_\_\_

BLDG Permit Fee \_\_\_\_\_

Building Inspector: \_\_\_\_\_ Date \_\_\_\_\_ TOTAL \_\_\_\_\_

I hereby certify that the above is true and correct to the best of my knowledge.

I hereby make Application for Permit as outlined above, and if same is granted I agree to conform to all Florida Building Code Regulations and City Ordinances regulating same and in accordance with plans submitted. The issuance of this permit does not grant permission to violate any applicable Town and/or State of Florida codes and/or ordinances.

COMPANY of Active Certificate Holder \_\_\_\_\_

State Registration or Certification Number \_\_\_\_\_ LICENSE # \_\_\_\_\_

Authorized Signature (License Holder or Agent) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone Number \_\_\_\_\_

NOTE: The Building Permit Number is required if the Gas Installation is associated with any construction or alteration where a Building Permit has been issued. Building Permit Number \_\_\_\_\_.

**RETAIN A COPY FOR OFFICE USE - Updated: 02-2012 FORM #GAS009**

To schedule an inspection please email your request to: [BDscheduling@UniversalEngineering.com](mailto:BDscheduling@UniversalEngineering.com)