

Gas Permit Application

Permit Center 2664 Riva Road Annapolis MD 21401

	ANT - Complete all applicabl	•	☐ AD	DDITION REPLACE SHELL	
Street	ation			Date Fee:	
Building	FloionName			Permit No.	
Tax Account # Building Permit #				Map Reference No. Block Parcel No.	
O W N E R	Mailing Address City	State Zip	C O N T R A C T O R	Company Name Master License # Mailing Address City State Zip Telephone	
GAS FITTING DATA ONLY: Type of Gas: Natural LP Pipe Size (dia. In.) Boiler #2 (BTU's)				tandard Pressure	
Furnace #1 (BTU's)		Range # 1 (BTU's)		Water Heater #1 (BTU's)	
Furnace #2 (BTU's)		Range # 2 (BTU's)		Water Heater #2 (BTU's)	
Furnace #3 (BTU's) Pool Heater (Pool Heater (BTU,s)		Other Gas (BTU)	
Boiler #1 (BTU's) Decorative App					
Describe	work to be done				
MAKE CHECK PAYABLE TO ANNE ARUNDEL COUNTY Application approved for permit by:			I certify and agree as follows: that I am authorized to make this application; that the information is correct; that I will comply with all the regulations of Anne Arundel County which are applicable hereto; that I will perform no work on the above property not specifically described hereon.		
Signatu	re	 Date	Maste	er Plumber/Master Gasfitter Signature Date	