CITY OF ALBANY

DEPARTMENT OF BUILDINGS & REGULATORY COMPLIANCE

200 Henry Johnson Boulevard Albany, NY 12210 Phone (518) 434-5165 Fax (518) 434-6015



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HEATING & AIR CONDITIONING PERMIT APPLICATION

This permit application is intended for applicants planning to install permanent heating and air conditioning apparatus. If we can help you at all in completing this application, don't hesitate to ask. Please note that it is the responsibility of the applicant to arrange for inspections.

GENERAL INFORMATION							
JOB SITE ADDRESS:							
TOTAL COST OF WORK (INCLUDING COST OF MATERIALS): \$ 1% OF TOTAL WORK COST: \$ BRC staff reserve the right to condition closure of a permit on proof of total cost of work.							
WHEN DO YOU NEED YOUR PERMIT? WE MAY EXPEDITE AN APPLICATION IF POSSIBLE AND APPROPRIATE.							
APPLICANT:				LICENSE No.:			
Address:							
EMAIL: PHONE:							
HOW WOULD YOU LIKE TO RECEIVE YOUR PERMIT (PLEASE CHOOSE ONE): A.) PICK UP \square OR B.) BY MAIL \square If you would like to receive your permit by mail, please include a stamped self-addressed envelope.							
OWNER:							
Address:							
EMAIL:					PHONE:		
FEE CALCULATION							
FLAT FEE (CHECK WHAT APPLIES): COMMERCIAL OR RESIDENTIAL WITH THREE OR MORE UNIT \$100 FEE WITH 1% SURCHARGE ON TOTAL COST OF WORK & MATERIALS							
FIXTURES FEE (INDIC.	ATE HOV	V MANY OF EACH FIXTURE YOU W	VILL BE I	NSTALLING):			
<u>Type</u>	<u>No.</u>	<u>Type</u>	<u>No.</u>	<u>Type</u>		<u>lo.</u>	
SPACE HEATERS \$10 EACH		HEAT PUMPS \$10 EACH		ROOF TOP UNITS \$20 EACH	HEATING PLANTS (+500K BTU) \$10 PER 100K BTUS EACH		
AIR CONDITIONING \$10/TON EACH		A/C COOLING BOXES \$10 EACH		BOILER(-500K BTU) \$20 EACH	BTU FURNACE (-500K BTU) \$20 EACH		
CHIMNEY LINERS \$20 EACH				OTHER (DESCRIBE): \$10 EACH			
PLEASE ADD THE FLAT FEE TO THE FIXTURES FEE AND APPLY THE 1% SURCHARGE, IF APPLICABLE.				\$10 EACH			
TOTAL FEE: \$				OTHER (DESCRIBE): \$10 EACH			
INSURANCE: HAVE YOU SUBMITTED PROOF OF THE NECESSARY INSURANCE TO BRC? YES \(\Bar{\text{NO}} \) NO \(\Bar{\text{NO}} \)							
WORKER'S COMP	ENSA1	ION: HAVE YOU SUBMI	TTED I	PROOF OF WORKER'S (COMP COVERAGE? YES ☐ NO ☐		
STAFF Use Only PERMIT NO.: APP. FEE: REC'D BY:							
					_		

 DATE REC'D:
 DATE ISSUED:
 ASSIGNED TO:
 SCANNED BY:
 Rev'd: 8/2017

JOB SITE ADDRESS:	
PROJECT DESCRIPTION (IF USEFUL, PLEASE PROVIDE A DESCRIPTION OF THE PROJECT	ct):
NOTE, DETAILED PLANS ARE REQUIRED WITH THIS APPLI	CATION.
Certification: I hereby certify that I have examined this contained therein to be correct. I understand that the granting violate or ignore any law, that this permit authorizes only the unless otherwise noted, in one year from the date of issuance.	ng of a permit does not grant authority to ne work described herein and will expire,
Applicant:	Date:
Staff Use Only	
THE FOLLOWING CONDITIONS APPLY TO THIS APPROVAL:	
APPROVED BY:	DATE:

Heating and Air Conditioning Instructions

Stop Work Orders. Note that this permit, if authorized, applies only to the work described herein and that a stop work order may be issued if the work goes beyond what was applied for.

<u>Fee Calculation</u>. Commercial and residential properties of three or more units are subject to a \$100 fee. Residential properties are subject to a \$50 fee. An additional per-fixture fee is applied for each fixture as described in the "fixtures fee" portion of this permit. Finally, a 1% surcharge is applied to the total cost of the project for work done on commercial and residential properties of three or more units.

<u>Inspections</u>. All projects are subject to a rough and a final inspection and no inspection may occur until all the necessary materials have been submitted to the department. Please request inspections at least 24 hours in advance and no inspection request will be accepted by voice or email.

Insurance. Either the owner of the contractor is required

to have a liability policy naming the City of Albany as insured or co-insured covering the work described in the permit application. This liability policy must be, at minimum, in the following amounts:

- a) \$100,000.00 Personal Injury single incident
- b) \$300,000.00 Personal Injury cumulative
- c) \$50,000.00 Property damage

Proof of Insurance. Before we may issue a building permit, we must have proof of insurance. A **contractor may file** an Owner's and Contractor's Protective Liability Policy, naming the City of Albany as an additional insured, for the individual job, in the required amounts; or the contractor may file a blanket policy with the City, covering all work to be undertaken within the period of the policy.

Worker's Compensation. As per NY GML § 125, we cannot issue a permit without proof of worker's compensation insurance. From contractors, we will need one of the following: 1) WCB form C-105.2 or U-26.3, 2) WCB form SI-12 or GSI -105.2, or 3) WCB form CE-200.

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