



# Permit Application for Residential Gas Appliance Installation

(Please Print)

Please complete this application (print or type), sign your name below and mail to or drop off at:

- Metropolitan Utilities District, Builder and Contractor Services,  
3100 S. 61st Ave., Omaha, NE 68106.
- Questions? Call 402.504.7014 or e-mail: customer\_service@mudomaha.com.
- To schedule an inspection of your gas appliance, call 402.504.7949.

Appliances over 5 years old will not be inspected by M.U.D. nor will the permit fee be reimbursed if a trip is made.

Date: \_\_\_\_\_, 20\_\_\_\_

Service address (include bay/apt. no.): \_\_\_\_\_

Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Installer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Person to contact for access: \_\_\_\_\_ Phone: \_\_\_\_\_

Does this house currently have gas service? \_\_\_\_\_ Yes \_\_\_\_\_ No

Gas service is:     new     additional     replacement -- no additional load     conversion

Building is:         new     existing     expanding

Type of heating permit:     forced air     ceiling furnace     boiler     water heater (over 100,000 Btu)  
                                    space heater     radiant heat     unit heater     pool heater (over 400,000 Btu)  
                                    floor furnace     wall heater         other

| Number                   | Make  | Model | BTU Input ea. Unit | Inspection Fee |
|--------------------------|-------|-------|--------------------|----------------|
| _____                    | _____ | _____ | _____              | _____          |
| _____                    | _____ | _____ | _____              | _____          |
| _____                    | _____ | _____ | _____              | _____          |
| _____ Total No. of Units |       |       | =====              | =====          |

Alternate non-renewable space heating sources other than natural gas?  no (  planning to install )  
 yes (  electric resistance     air source heat pump     ground source heat pump     oil )

I certify the above information is correct to the best of my knowledge. I also understand M.U.D. may deny gas to the applicant if a permit is granted on the basis of incorrect or misleading information furnished. I agree to these conditions and all M.U.D. Gas Rules and Regulations.

\_\_\_\_\_  
*Owner/Installer's Signature* \_\_\_\_\_  
*Date*

**(M.U.D. use only)**

Paid by: \_\_\_\_\_

Check No. \_\_\_\_\_ Amount: \_\_\_\_\_

Remarks: \_\_\_\_\_