



WESTPORT WESTON HEALTH DISTRICT

180 Bayberry Lane, Westport, CT 06880-2855

Telephone: (203) 227-9571

**Non-Transferable
Approval Valid for One Year**

Fee - \$30.00

Fee is Non-Refundable

**APPLICATION TO INSTALL GENERATORS,
FUEL STORAGE TANKS & OUTDOOR HVAC UNITS**

Location: _____ Westport Weston

Owner: _____ Address: _____

Installer: _____ Lic. No: _____ Tel: (_____) _____

Owner/applicant accepts full responsibility for the accuracy of the information and plot plan provided. Owner/applicant also accepts the responsibility for the relocation of the proposed generator/buried or above ground storage tank or outdoor HVAC unit should it be necessary to repair/replace the well and/or septic system within the required separating distance.

Provide a plot plan showing the proposed generator, fuel storage tank or outdoor HVAC unit. Show the existing well and the septic system.

North Indicated

Please indicate:
 Generator _____
 HVAC _____
 Oil - above ground _____
 Oil-below ground _____
 Propane - above ground _____
 Propane -below ground _____

Applicant's Signature: _____

Date: _____

Please Print: _____

APPLICATION APPROVED

DENIED

OTHER

Signature of Sanitarian: _____

Date: _____

Copy to Building Department