



MECHANICAL PERMIT APPLICATION

Please print clearly all information. Incomplete applications will not be accepted.

FAILURE TO OBTAIN A PERMIT BEFORE CONSTRUCTION BEGINS WILL RESULT IN FEE BEING DOUBLED

JOB SITE ADDRESS: _____

OWNER'S NAME: _____

CONTRACTOR: (ALL CONTRACTORS MUST BE REGISTERED WITH THIS OFFICE BEFORE PERMIT ISSUANCE)

LICENSE HOLDER: _____

COMPANY NAME: _____

OFFICE PHONE: _____ CELL PHONE: _____

LICENSE #: _____ EXPIRE DATE: _____

BUILDING TYPE: RESIDENTIAL

COMMERCIAL

CLASS OF WORK: NEW CONSTRUCTION

ALTERATION

ADDITION TO EXIST BLDG.

REPAIR

DESCRIPTION OF WORK: _____

NUMBER OF ITEMS:

_____ HEATING UNITS

_____ AIR CONDITIONING UNITS

_____ DUCT OUTLETS

_____ COMMERCIAL REFRIGERATION UNITS

_____ OTHER _____

Printed name _____ Signature _____

Date _____ Application accepted by: _____