



## MECHANICAL PERMIT APPLICATION

APPLICATION DATE \_\_\_/\_\_\_/\_\_\_

**This application is not a permit until fees are received and processed. Any work prior to permit issuance is prohibited. If the mechanical work is associated with a building permit DO NOT USE this form. Please use the contractor's affidavit.**

INSTALL \_\_\_\_\_ REPAIR \_\_\_\_\_ REPLACE \_\_\_\_\_

CONTRACTOR

\_\_\_\_\_  
Mechanical Contractor / Applicant Name

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Company Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Business License No.

\_\_\_\_\_  
State Cert. No.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Expires

\_\_\_\_\_  
City / County Held

\_\_\_\_\_  
Signature of State Certified Mechanical Contractor

\_\_\_\_\_  
E-mail

SITE

\_\_\_\_\_  
Site Address

\_\_\_\_\_  
Subdivision / Tenant

\_\_\_\_\_  
Property Owner

\_\_\_\_\_  
Lot / Suite / Bldg No.

\_\_\_\_\_  
Property Owner Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Phone

FEE

**Administrative Fees: \$ 25.00**

**Minim Permit Fees \$50**

**Estimated Job Cost: \_\_\_\_\_**

**Heating Units:**

Number of Units \_\_\_\_\_

Model Name \_\_\_\_\_

Model Number \_\_\_\_\_

Tons \_\_\_\_\_

Heat Gain \_\_\_\_\_

CFM \_\_\_\_\_

**Refrigeration or Air Condition Units:**

Number of Units \_\_\_\_\_

Model Name \_\_\_\_\_

Model Number \_\_\_\_\_

Tons \_\_\_\_\_

Heat Gain \_\_\_\_\_

CFM \_\_\_\_\_

**Fans:**

Number of Fans \_\_\_\_\_

H.P. \_\_\_\_\_

CFM \_\_\_\_\_

**Grease Hoods:**

Number of Hoods \_\_\_\_\_

Sq. Feet \_\_\_\_\_

CFM Required \_\_\_\_\_

**Commercial Grease Hoods require Plan Review and an Engineers Seal**

Size of Vent \_\_\_\_\_

**Incinerator:**

Residential \_\_\_\_\_

Commercial \_\_\_\_\_

**Gas Range Outlets:**

Residential \_\_\_\_\_

Commercial \_\_\_\_\_

Number of gas pipe \_\_\_\_\_

Total BTU of pipe \_\_\_\_\_