

## **MECHANICAL PERMIT APPLICATION**

Jurisdiction of			NO
Job Address			
Legal Description	Lot No.	Block	
Owner	Mail Address	Phone	
Contractor	Mail Address	Phone	License No.
Architect	Mail Address	Phone	License No.
7 d office ce	Ivian / taaress	Thome	Electise No.
Engineer	Mail Address	Phone	License No.
Engineer	Iviali Address	Phone	License No.
Use of Building			
Class of Work:   New   Addition   Alteration   Repair   Move   Remove			
Class of Work. Effect Execution Externation Element			
Describe Work:			
Special Conditions:			
Special conditions.			
Application accepted by:	Plans checked b		Approved for issuance by:
Application accepted by.	Fians checked b	уу.	Approved for issuance by.

Notice: This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. I hereby certify that I have read and examined this application and know same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give

authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction. Signature of Contractor or Authorized Agent Date Signature of Owner (If owner built) Date **Type of Fuel:** \_\_\_Natural Gas Oil **Type of Equipment: Forced Air** \_\_\_ Gravity \_\_\_\_ Floor Furnace Wall Heater **Unit Heater** \_\_\_\_ Gas-fired AC Unit \_\_\_\_ Air Conditioning Unit **Refrigeration Unit** Boilers Under 100,000/3mp **Air Handling Unit Evaporative Cooler** Ventilation Fan \_\_\_\_ Range Hood Incinerator \_\_\_\_ Clothes Dryer **Gas Piping Outlets (First 4 Outlets) Permit Issuance Fee:** \$50.00 WHEN PRPOERLY VALIDATED, THIS IS YOUR PERMIT Method of Payment\_\_\_\_\_ Amount Paid \_\_\_\_\_ **Fee Validation** 

Inspector\_\_\_\_\_

**Permit Validation** 

**Date**