

BUILDING PERMIT APPLICATION FORM

7/1/05

MECHANICAL/HVAC

(PLAN APPROVAL REQUIRED)

CONTRACTOR NAME: _____ PHONE #: _____

ADDRESS: _____ CITY/STATE: _____

OWNER NAME: _____ PHONE #: _____

ADDRESS: _____ CITY/STATE: _____

TYPE JOB: _____ RESIDENTIAL: _____ COMMERCIAL: _____

DIRECTIONS TO JOB OFF U.S. HIGHWAY:

COST OF JOB (ESTIMATED): _____

NAME OF HEATING & AIR CONTRACTOR: _____

FIREPLACE: _____ TYPE OF HEAT: _____ COOLING: _____

SIZE OF HEATING: _____ SIZE OF COOLING: _____ BTU: _____

COST OF HEATING: _____ COST OF COOLING: _____

FIRE SPRINKLER SYSTEM: _____

COST OF FIRE SPRINKLER SYSTEM: _____

NAME OF APPLICANT: _____ PHONE #: _____

EMAIL ADDRESS: _____ CHECK IN MAIL: _____ PICK UP & PAY: _____

SIGNATURE OF APPLICANT: _____