



APPLICATION FOR MECHANICAL PERMIT

Project Address:		Contractor:	
Property Owner:		Contractor License #:	
Mailing Address:		Mailing Address:	
City/State/Zip:		City/State/Zip:	
Phone Number:		Phone Number:	
Email:		Email:	

Description of Work:	Total Cost of Project Materials & Labor:

Appliance make, model, and listing:	
Appliance location:	
Piping material:	
Refrigerant type and amount:	

The following are required at the time of application:	
Combustion air calculation	<input type="checkbox"/>
Manual J, S, and D as applicable	<input type="checkbox"/>
Appliance and equipment installation manuals	<input type="checkbox"/>
Venting diagram dictating type, length, bends, connections, and termination	<input type="checkbox"/>
New gas piping sizing calculation if piping has changed	<input type="checkbox"/>

NOTICE: READ BEFORE SIGNING

By signing this application form, I hereby certify that all answers contained herein are true and accurate to the best of my knowledge, and further agree to comply with all applicable statutes, rules, and regulations. Any violation of applicable statutes, rules, and regulations may result in revocation of this permit. An inspection must be scheduled within 10 days of completion.

Signature of Owner/Contractor	Date
-------------------------------	------

APPLICATION: **APPROVED** **DENIED**

_____ Date _____ Building Inspector

COMMENTS: _____