



MECHANICAL PERMIT APPLICATION

Cash
 Check _____
 Credit Card _____
 Prepaid

Permit No. _____

Received \$ _____

Date: _____

Receipt No. _____

Contractor's Name		
Company Name		
Mailing Address		
City	State	Zip
Office Phone Number	Fax Number	Cell Number
E-mail address:		
Project Address	Valuation of Project:	
Street		
Property Owner / Tennant		Phone Number

**Permit Type: Check ALL that apply
(Minimum fee \$30.00)**

<input type="checkbox"/> Heat / Air Complete System	Per Unit	_____ X	\$25.00	_____
<input type="checkbox"/> Mini Split System	Per Unit	_____ X	\$ 5.00	_____
<input type="checkbox"/> Duct Work Only			\$20.00	_____
<input type="checkbox"/> Exhaust Fan (Commercial Type)			\$25.00	_____
<input type="checkbox"/> Fireplace	Per Unit	_____ X	\$25.00	_____
<input type="checkbox"/> Condenser Repair/Replace	Per Unit	_____ X	\$25.00	_____
<input type="checkbox"/> Mobile Home Connection	Per Unit	_____ X	\$25.00	_____
<input type="checkbox"/> Other _____			\$25.00	_____
<input checked="" type="checkbox"/> State Uniform Building Code Fee			\$ 5.00	\$5.00

FEES MAY APPLY DURING CONSTRUCTION

- ⇒ Work performed prior to **ISSUED** permit - Double above fees
- ⇒ Failure to apply for permit \$100.00
- ⇒ Partial Inspections (per inspection) \$ 5.00
- ⇒ State License Number not displayed on vehicle (per vehicle)
- ⇒ Re-Inspection (first time) \$ 25.00
- ⇒ After Hours Inspection (per inspection) \$ 50.00
- ⇒ No Valid City License \$100.00
- ⇒ No Valid State License \$100.00
- ⇒ Re-Inspection (each additional) \$ 50.00

Contractor's Signature: _____ **Date:** _____

(NOTE: fees must be paid in full prior to beginning work)