



P.O. Box 505  
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## HVAC Permit Application

DATE OF APPLICATION \_\_\_\_\_ PERMIT NO. \_\_\_\_\_ PAID \_\_\_\_\_ RECEIPT # \_\_\_\_\_

Residential \_\_\_\_\_ Commercial \_\_\_\_\_

Project Address \_\_\_\_\_

Owner/Tenant name \_\_\_\_\_ Phone \_\_\_\_\_

HVAC/R Contractor name \_\_\_\_\_ License # \_\_\_\_\_

	Fee	Date	Inspector
Permit	\$15.00		
.07 cents per sq/ft under roof		_____	
(new construction only)			
Unit Change Out \$35.00		_____	
<b>Commercial</b>			
\$1 per \$1000 of HVAC/R job		_____	
Inspection fee	\$35.00		
Total		_____	

All projects are subject to a re-inspection fee, that will have to be paid before the re-inspection happens.

Re-Inspection \$35.00 \_\_\_\_\_

I hereby certify that the date submitted on this application is true. Any deviation from information obtained hereto, unless approved by the HVAC/R inspector, will render this permit null and void. Work must be commenced within three (3) months or this permit becomes null and void.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

HVAR/R Inspector \_\_\_\_\_ Date \_\_\_\_\_

Fire Marshal \_\_\_\_\_ Date \_\_\_\_\_

Issues

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