



Type of Use	<input type="radio"/> Residential <input type="radio"/> Commercial <input type="radio"/> Industrial	<input type="radio"/> Multi-Family <input type="radio"/> Mixed Use	Type of Work	<input type="radio"/> New Construction <input type="radio"/> Remodel/Alteration <input type="radio"/> Maintenance	<input type="radio"/> Addition <input type="radio"/> Repair <input type="radio"/> Change Out
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Site Address	Address	Suite/Apartment No.	City	State	Zip
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Project Contacts (Contact Person & Business Name)

Applicant	Address			Email
	City	State	Zip	Phone

Property Owner	Address			Email
	City	State	Zip	Phone

Contractor	Address			Email
	City	State	Zip	Phone

Project Manager	City	State	Zip	Phone
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State Contractor License	No.
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Mechanical Bond	No.
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Plumbing Section

Specify number of fixtures _____. Is a plumbing plan attached? ☐ Yes ☐ No
 Does your plumbing plan include a fire sprinkler? ☐ Yes ☐ No Lawn sprinkler? ☐ Yes ☐ No
 Description of work: _____

 Plumbing Project Valuation (total cost includ. materials + labor): _____

Mechanical Section

Heating unit (☐ Gas) (☐ Other _____) (Efficiency _____ %) (Size _____ BTU)
 (☐ Sealed Combustion) (☐ Direct/Power Vented) (☐ Atmospherically Vented) (☐ Other _____)
Water heater (☐ Electric) (☐ Gas) (☐ Sealed Combustion) (☐ Direct/Power Vented) (☐ Atmospherically Vented)
Cooling unit (Size _____) (Seer _____)
 Description of work: _____

 Mechanical Project Valuation (total cost includ. materials + labor): _____

Applicant listed on Plumbing/Mechanical Permit Application certifies that all pertinent state regulations and City ordinances will be complied with in performing the work for which the permit is issued.

Applicant Name (print)		Permit No. (staff only)	
Applicant Signature (initial to sign)		Application Date	