

MECHANICAL PERMIT APPLICATION

Date: _____ Permit No.# _____ Permit Fee:\$ _____

Mechanical Contractor: _____ Phone# _____
(As shown on your license)

Address: _____

NC Mechanical License #: _____ Email: _____

Project Address: _____ **Total Sq. Ft.** _____

Owner of Project: _____
(Owner information along with address must be filled in order to submit application)

Address: _____
City State Zip Code

TOTAL PROJECT COST: \$ _____

OCCUPANCY TYPE:(CHECK ONE) RESIDENTIAL COMMERCIAL

Check One: Remodel: _____ Repair: _____ New Installation: _____

HEIGHT OF EXISTING ROOFTOP UNIT & CURB _____

HEIGHT OF PROPOSED ROOFTOP UNIT & CURB _____

FOR INSTALLATION OF:

**BTU: _____ KW/TON: _____

NO. WARM AIR FURNACES (GAS PACK, GAS OR OIL FURNACE)..... _____

NO. HEAT PUMP/SPLIT SYSTEMS..... _____

OTHER (SPECIFY)..... _____

****IF GAS PACK, GAS OR OIL FURNACE, NEED BTU'S.**

If these are gas units, please have fuel piping contractor submit fuel piping application.

Contractor/Applicant Printed Name/Signature