

# MECHANICAL PERMIT APPLICATION

## CITY OF SHELBY

Nº

*Applicant to complete numbered spaces only.*

1	JOB ADDRESS		
2	OWNER	MAIL ADDRESS	ZIP PHONE
3	CONTRACTOR	MAIL ADDRESS	PHONE LICENSE NO.
4	ARCHITECT	MAIL ADDRESS	PHONE LICENSE NO.
5	ENGINEER	MAIL ADDRESS	PHONE LICENSE NO.
6	USE OF BUILDING		
7	CLASS OF WORK: <input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR		
8	DESCRIBE WORK:		

OWNER

JOB ADDRESS

SPECIAL CONDITIONS:

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APPLICATION ACCEPTED BY: \_\_\_\_\_ APPROVED FOR ISSUANCE BY: \_\_\_\_\_

Type Fuel: <input type="checkbox"/> Oil <input type="checkbox"/> N. Gas <input type="checkbox"/> LPG			
PERMIT FEES			
No.	TYPE OF EQUIPMENT	INPUT RATING	Fee
	BOILER		\$
	FAN COIL UNIT		
	INFRARED HEATER		
	AIR COND. UNIT		
	AIR HANDLING UNIT		
	GAS PACK		
	CENTRAL FURNACE		
	HEAT PUMP		
	W/STRIP HEATER		
	DUCT HEATER		
	FLOOR FURNACE		
	UNIT HEATER		
	SPACE HEATER		
	DUCT SYSTEM		
	REF'G UNIT		
	EXHAUST HOOD & SYSTEM		
	GAS PIPING		
	OTHER:		
<b>TOTAL FEES</b>			<b>\$</b>

**NOTICE**

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 1 YEAR AT ANY TIME AFTER WORK IS COMMENCED.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

\_\_\_\_\_  
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT (DATE)

\_\_\_\_\_  
SIGNATURE OF OWNER (IF OWNER BUILDER) (DATE)

**WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT**

PLAN CHECK VALIDATION CK.    M.O.    CASH    PERMIT VALIDATION CK.    M.O.    CASH