



HVAC PERMIT REQUEST RESIDENTIAL

Job Address _____
(Number and Street)

Property Owner _____	Contractor _____
Address _____	Address _____
City - Zip _____	City - Zip _____
Phone _____	Phone _____
Email _____	Email _____

PERMIT FEES:

NEW STRUCTURES: \$100.00, plus \$20.00 per 100 sq. ft. OF GROSS FLOOR AREA or fraction thereof (plus 1%)

ADDITIONS/ALTERATIONS: \$100.00, plus \$20.00 per 100 sq. ft. OF GROSS FLOOR AREA or fraction thereof (plus 1%)

FURNACE - BOILER - AIR CONDITIONER: \$75.75 (includes 1% state surcharge) *per UNIT*

NEW CONSTRUCTION:	INTERIOR ALTERATION:
GROSS square foot of area being built/altered:	

Briefly describe the nature of the work being done:

Estimated cost of the work: _____

FURNACE – A/C: New or Replacement? New Replacement
 – (Make/Model/Location required) **Installing a liner** _____

Make:	Model #	Location:
Location of A/C Unit:	<input type="checkbox"/> Behind House <input type="checkbox"/> Side of House (must be pre-approved) (must submit a site plan showing location of condenser)	Capacity: _____ Tons

PER RCO SECTION 1307: *The manufacturer's operating and installation instructions shall remain attached to the appliance.*

Applicant Name (please print) _____

Signature of Applicant _____ Date _____

OFFICE USE ONLY:

PERMIT NO: _____ DATE ISSUED: _____



HVAC PERMIT REQUEST COMMERCIAL

Job Address _____ Job Name _____
(Number and Street)

Property Owner _____ Contractor _____

Address _____ Address _____

City - Zip _____ City - Zip _____

Phone _____ Phone _____

Email _____ Email _____

PERMIT FEES:

NEW CONSTRUCTION/ALTERATIONS: \$200.00 plus \$30.00 per 100 sq. ft. or fraction (+ 3% state surcharge)

REPLACEMENT A/C: \$20.00 per ton or fraction (+ 3%)

REPLACEMENT HVAC COMBO UNIT: \$100.00 plus \$20.00 per ton or fraction (+ 3%)

REPLACEMENT HEATING UNIT: \$103.00 (includes 3% state surcharge)

Briefly describe the nature of the work being done:

Is this work associated with a build out project? _____ Yes _____ No

If yes, please provide Building Permit Number _____

AREA - square footage of building or suite being built/alterd:

Type of heating system:

A/C - COMBO: No. of Units:

Total Tons:

Estimated cost of the work: _____

Applicant Name (please print) _____

Signature of Applicant _____ Date _____

OFFICE USE ONLY:

PERMIT NO: _____ DATE ISSUED: _____