## **MECHANICAL INSPECTOR TECHNICAL SECTION**

**Date Received** Date Issued

Permit #

D. TECHNICAL SITE DATA

**DESCRIPTION OF WORK** 

A	. IDENTIFICATION	ON-APPI	L <b>ICANT:</b> COMP	LETE ALL A	PPLICABLE IN	IFORMATION.	WHEN CHAI	<b>IGING</b>
C	ONTRACTORS.	NOTIFY	THIS OFFICE.					

Block Lot Work Site Location  Owner in Fee Address  Tele. () Contractor Address  Tele. () Fax () Lic. No. Federal Emp. No.  B. MECHANICAL CHARACTERISTICS Use Group R-3/R-4 Heating System [] Conversion [] Replacement Fuel: [] Gas [] Oil [] Electric [] Solar [] Other Type: [] Hydronic [] Hot Air Estimated Cost of Mechanical Work \$  JOB SUMMARY (Office Use Only) PLAN REVIEW: [] No Plans Required Joint Plan Review Required [] Bidg. [] Plumb. [] Elec. [] Elevator [] Fire [] Mech. PLANS APPROVED Date:	CONTRACTORS, NOTIFY THIS OFFICE.	
Dwner in Fee		
Address    Sele. (		
Tele. () Contractor Address  Tele. ()	Owner in Fee	
Contractor Indidices	Address	
Contractor Address  Fele. (	[ele. ()	
Tele. ( )	Contractor	
Tele. ( )	Address	
ic. No		
S. MECHANICAL CHARACTERISTICS Use Group R-3/R-4 Heating System [ ] Conversion [ ] Replacement Fuel: [ ] Gas [ ] Oil [ ] Electric [ ] Solar		
Jse Group R-3/R-4 Heating System [ ] Conversion [ ] Replacement  Fuel: [ ] Gas [ ] Oil [ ] Electric [ ] Solar  [ ] Other  Type: [ ] Hydronic [ ] Hot Air  Estimated Cost of Mechanical Work \$   JOB SUMMARY (Office Use Only)  PLAN REVIEW: [ ] No Plans Required  Joint Plan Review Required  [ ] Bidg. [ ] Plumb. [ ] Elec. [ ] Elevator [ ] Fire [ ] Mech.  PLANS APPROVED  Date:		
Jse Group R-3/R-4 Heating System [ ] Conversion [ ] Replacement  Fuel: [ ] Gas [ ] Oil [ ] Electric [ ] Solar	45011411041 01145407550700	
Heating System [ ] Conversion [ ] Replacement  Fuel: [ ] Gas [ ] Oil [ ] Electric [ ] Solar  [ ] Other  Type: [ ] Hydronic [ ] Hot Air  Estimated Cost of Mechanical Work \$   JOB SUMMARY (Office Use Only)  PLAN REVIEW: [ ] No Plans Required  Joint Plan Review Required  [ ] Bidg. [ ] Plumb. [ ] Elec. [ ] Elevator [ ] Fire [ ] Mech.  PLANS APPROVED  Date:		
Fuel: [ ] Gas [ ] Oil [ ] Electric [ ] Solar  [ ] Other  Type: [ ] Hydronic [ ] Hot Air  Estimated Cost of Mechanical Work \$  JOB SUMMARY (Office Use Only)  PLAN REVIEW: [ ] No Plans Required  Joint Plan Review Required  [ ] Bldg. [ ] Plumb. [ ] Elec. [ ] Elevator [ ] Fire [ ] Mech.  PLANS APPROVED  Date:		[ ] Declarament
[ ] Other Type: [ ] Hydronic [ ] Hot Air  Estimated Cost of Mechanical Work \$  JOB SUMMARY (Office Use Only)  PLAN REVIEW: [ ] No Plans Required  Joint Plan Review Required [ ] Bldg. [ ] Plumb. [ ] Elec. [ ] Elevator [ ] Fire [ ] Mech.  PLANS APPROVED  Date:		
Type: [ ] Hydronic [ ] Hot Air  Estimated Cost of Mechanical Work \$		
JOB SUMMARY (Office Use Only)  PLAN REVIEW:  [ ] No Plans Required  Joint Plan Review Required  [ ] Bldg. [ ] Plumb.  [ ] Elec. [ ] Elevator  [ ] Fire [ ] Mech.  PLANS APPROVED  Date:	[ ] Other	Net Air
JOB SUMMARY (Office Use Only)  PLAN REVIEW: [ ] No Plans Required  Joint Plan Review Required [ ] Bldg. [ ] Plumb. [ ] Elec. [ ] Elevator [ ] Fire [ ] Mech.  PLANS APPROVED  Date:	Type: [ ] Hydronic [ ]	HOT AIR
PLAN REVIEW:  [ ] No Plans Required  Joint Plan Review Required  [ ] Bldg. [ ] Plumb.  [ ] Elec. [ ] Elevator  [ ] Fire [ ] Mech.  PLANS APPROVED  Date:	stimated Cost of Mechanical Work \$ _	- Ja
PLAN REVIEW:  [ ] No Plans Required  Joint Plan Review Required  [ ] Bldg. [ ] Plumb.  [ ] Elec. [ ] Elevator  [ ] Fire [ ] Mech.  PLANS APPROVED  Date:	IOR SHIMMARY (Office Hee Only)	
[ ] No Plans Required Joint Plan Review Required [ ] Bldg. [ ] Plumb. [ ] Elec. [ ] Elevator [ ] Fire [ ] Mech. PLANS APPROVED Date:		*
Joint Plan Review Required  [ ] Bldg. [ ] Plumb.  [ ] Elec. [ ] Elevator  [ ] Fire [ ] Mech.  PLANS APPROVED  Date:		
[ ] Bldg. [ ] Plumb. [ ] Elec. [ ] Elevator [ ] Fire [ ] Mech. PLANS APPROVED Date:		,
[ ] Elec. [ ] Elevator [ ] Fire [ ] Mech. PLANS APPROVED Date:	THE PERSONNEL TO COMPANY OF SHARE AND A STATE OF CONTROL PARK.	
[ ] Fire [ ] Mech. PLANS APPROVED Date:		
PLANS APPROVED Date:		
Date:		
Approved by:		
	Approved by:	-
	hereby certify that I am the (agent of) owner ecord and am authorized to make this applic	

	*	

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NO.	FIXTURE/EQ	UIPMENT	FEE (Office Use Only)
	Water Heate	er	
-	Fuel Oil Pipi	ng	
	Gas Piping		
	Steam Boile	r l	
	Hot Water B	oiler	
	Hot Air Furn	ace	
	Oil Tank		
	LPG Tank		
	Fireplace	1	
	Other		
	Other		
	**		
		Administrative Surcharge	\$
		Minimum Fe	e \$
			\$
		TOTAL FEE	\$

Signature

**APPLICANT**