

MECHANICAL INSPECTOR TECHNICAL SECTION

Date Received _____

Date Issued _____

Permit # _____

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE.

Block _____ Lot _____

Work Site Location _____

Owner in Fee _____

Address _____

Tele. (_____) _____

Contractor _____

Address _____

Tele. (_____) _____ Fax (_____) _____

Lic. No. _____

Federal Emp. No. _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

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 \$ _____

NO.	FIXTURE/EQUIPMENT	FEE (Office Use Only)
_____	Water Heater	_____
_____	Fuel Oil Piping	_____
_____	Gas Piping	_____
_____	Steam Boiler	_____
_____	Hot Water Boiler	_____
_____	Hot Air Furnace	_____
_____	Oil Tank	_____
_____	LPG Tank	_____
_____	Fireplace	_____
_____	Other	_____

Water Heater

Fuel Oil Piping

Gas Piping

Steam Boiler

Hot Water Boiler

Hot Air Furnace

Oil Tank

LPG Tank

Fireplace

Other

FEE (Office Use Only)

Administrative Surcharge	\$ _____
Minimum Fee	\$ _____
	\$ _____
TOTAL FEE	\$ _____

<p>JOB SUMMARY (Office Use Only)</p> <p>PLAN REVIEW:</p> <p><input type="checkbox"/> No Plans Required</p> <p>Joint Plan Review Required</p> <p><input type="checkbox"/> Bldg. <input type="checkbox"/> Plumb.</p> <p><input type="checkbox"/> Elec. <input type="checkbox"/> Elevator</p> <p><input type="checkbox"/> Fire <input type="checkbox"/> Mech.</p> <p>PLANS APPROVED</p> <p>Date: _____</p> <p>Approved by: _____</p>
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C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

APPLICANT