



PRELIMINARY MECHANICAL PERMIT APPLICATION

Job Address _____

Property Owner Name _____

Mailing Address _____

Phone _____

Email _____

Contractor Name _____

Mailing Address _____

Email _____

Phone _____

Contractor License # _____

Description of Work: _____

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 or implied herein or not.

Signature of Property Owner

Date

Signature of Contractor

Date

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FOR DEPARTMENT USE ONLY

Mechanical Permit Fee _____

TOTAL PERMIT FEE _____

Signature of City Deputy Clerk or Clerk/Treasurer

Signature of Building Inspector