

Chief Executive Officer
Michael Thurmond

DEPARTMENT OF PLANNING & SUSTAINABILITY

Director
Andrew A. Baker, AICP

MECHANICAL PERMIT APPLICATION

Date: _____

Shaded area for office use Mechanical Permit Number	Building Permit Number	Check Applicable Type: <input type="checkbox"/> Residential <input type="checkbox"/> Non-Residential
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Job Address	City	State	Zip
Building No.	Floor No.	Apt / Lot #	Unit / Suite #

Check One: <input type="checkbox"/> New (New Bldg.) <input type="checkbox"/> Addition (Bldg. Enlargement) <input type="checkbox"/> Expansion (To Exist. Sys.) <input type="checkbox"/> Replacement			
<input type="checkbox"/> Air Condition <input type="checkbox"/> Gas Forced Air <input type="checkbox"/> Electric Forced Air <input type="checkbox"/> Vent Only	<input type="checkbox"/> Floor Furnace <input type="checkbox"/> Wall Furnace <input type="checkbox"/> Space Heater <input type="checkbox"/> Steam & Hot Water	<input type="checkbox"/> Bath fan <input type="checkbox"/> Ventilation Fan <input type="checkbox"/> Range Hood <input type="checkbox"/> Fireplace	
Net Load:	Heat Loss:	Heat Gain:	

DESCRIPTION OF WORK: _____

BOILERS AND HEATING APPLIANCES (BTU Input)		VERTICAL GAS VENTS (BTU Input)	
Up to 300,000 No. ____ X \$25.00 = _____	300,001 to above No. ____ X \$35.00 = _____	Up to 100,000 No. ____ X \$25.00 = _____	100,001 and up No. ____ X \$35.00 = _____
Decorative fire place No. ____ X \$35.00 = _____		Clothes dryer vents No. ____ X \$20.00 = _____	

A/C AND REFRIGERATION APPLIANCES (Tons)	OTHER
Up to 10 No. ____ X \$25.00 = _____	Fireplace lighters No. ____ X \$25.00 = _____
11 to 30 No. ____ X \$35.00 = _____	Gas line (per connection) No. ____ X \$25.00 = _____
31 to 100 No. ____ X \$40.00 = _____	Duct work installation (per system) No. ____ X \$25.00 = _____
101 and up No. ____ X \$60.00 = _____	Zone dampers No. ____ X \$25.00 = _____
NOTE: A/C package unit must include heat (2 x \$25).	Fire suppression system No. ____ X \$30.00 = _____
	Fire inspection \$100.00= _____
	Fire review \$100.00= _____
	Fire plan resubmittal \$150.00= _____
	Safety inspection No. ____ X \$75.00 = _____
	PIU/VAC No. ____ X \$75.00 = _____

RANGE HOODS (Face area or hood sq. ft.)	VENTILATION FANS (HP)
Residential Hood No. ____ X \$20.00 = _____	Up to 1.5 No. ____ X \$25.00 = _____
Commercial Hood No. ____ X \$50.00 = _____	1.5 to 10 No. ____ X \$30.00 = _____
FIRE REVIEW FEES: Attach County Review Application	11 to 20 No. ____ X \$35.00 = _____
	21 and up No. ____ X \$40.00 = _____
	Residential vent fans No. ____ X \$20.00 = _____
	TOTAL= _____

***** List the names, model numbers, and ratings (BTU input, compressor HP, hood face area in sq. ft., fan motor HP) of all appliances indicated in this application (continued on page 2). *****

Fee Schedule: MINIMUM FEE \$120. Additional \$200 for Fire Suppression Systems (Fire Review & Inspection Fee)	TOTAL FEES \$
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MECHANICAL RE-INSPECTION FEES	1 st Re-inspect \$25.00	2 nd Re-inspect \$50.00	3 rd Re-inspect \$100.00
FIRE INSPECTOR RE-INSPECTION FEES	1 st Re-inspect \$50.00	2 nd and over - \$100.00	

ALL APPLIANCES AND EQUIPMENT INDICATED IN THE FEE SCHEDULE OF THIS APPLICATION SHALL BE LISTED HERE AS FOLLOWS: (Attach additional sheet if necessary)

NAME

MODEL NUMBER

RATING

BOILERS AND HEATING APPLIANCES

A/C AND REFRIGERATION

RANGE HOODS

VENTILATION FANS

By signing this application, I certify that the design and installation meets the Georgia Uniform Codes Act, Mechanical Code, Fuel Gas Code, Energy Code and ACCA Manuals "D" & "J" for ductwork and sizing. Copies of RESCheck or COMCheck will be maintained for future reference or other approved sizing method. I understand that if I provide false or misleading information in this application I may be subject to criminal prosecution and/or immediate revocation of any building permit or certification issued as a result of this application. I understand that I must comply with all County ordinances and regulations.

Company:		Applicant:		Owner:		
Address:				Address:		
City:	State:	Zip	City:	State:	Zip	
Fax #:	Mobile #:		Fax #:	Mobile #:		
Email:			Email:			
State License #:	Business License #:	Signature of Homeowner:				
Signature of State Cardholder:			(Sign only if work is being performed by homeowner)			
Print Name:			Print Name:			

NOTE: Copy of permit, drawings, plans and sketches to be posted at the jobsite.