



Mechanical Permit Application

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Updated **SEPT 2026**

OFFICE USE ONLY

Permit Number: _____ Total Fees: _____

Approved by: _____ Date Approved: _____

Contractor Information

Contracting Company _____ Contractor Name _____

Contractor Address _____

Contractor Email _____ Contractor Phone _____

Local Business License Number _____ State License Number _____

Job Address _____ Owner Name _____

Owner Address _____

Owner Email _____ Owner Phone _____

Description of Work _____ Cost of Work _____

Affidavit

By signing below, I acknowledge that I am the owner/property manager and accept all responsibility pertaining to this request:

Applicant Name _____ Applicant Signature _____ Date _____