MECHANICAL PERMIT APPLICATION

Permits will be returned by mail when applications are accompanied by permit fee and self-addressed envelope.

Project Address

Property Owner or General Contractor and Phone No

<table>
<thead>
<tr>
<th>APPLICANT</th>
<th>Name of Person or Firm (Please Print)</th>
<th>License No.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Address

<table>
<thead>
<tr>
<th>PROJECT DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ New ☐ Addition ☐ Alteration ☐ Repair ☐ Replace</td>
</tr>
<tr>
<td>☐ One-Fam Res ☐ __-Bed Nurse Home ☐ Theater ☐ Office ☐ Garage</td>
</tr>
<tr>
<td>☐ Two-Fam Res ☐ __-Bed Hospital ☐ Restaurant ☐ Bank ☐ Shop</td>
</tr>
<tr>
<td>☐ __-Unit Apt ☐ __-Pupil School ☐ Lounge ☐ Clinic ☐ Factory</td>
</tr>
<tr>
<td>☐ __-Rm Motel ☐ __-Pupil Day Care ☐ Store ☐ Auto Service ☐ Warehouse</td>
</tr>
<tr>
<td>☐ __-Rm Hotel ☐ __-Seat Church ☐ Other (Describe)</td>
</tr>
</tbody>
</table>

COMPLETE THE DESCRIPTION OF THE WORK BELOW

Date: [ ]

PLANS

For all work done under this permit the undersigned accepts full responsibility for compliance with the City of Lakewood Building Code and all other applicable state and city ordinances.

Estimated Value $ Permit Fee $ Tax Exempt No Use Tax $

Print Name (owner or contractor)

Signature (owner or Contractor)

TOTAL $

MECHANICAL INSTALLATION INFORMATION

COMPLETE APPLICABLE SECTIONS BELOW, INDICATE SYSTEM(S) AND CHECK ITEMS TO BE INCLUDED THEREIN

SCOPE OF PROJECT:

☐ NEW ☐ EXTENSION OF EXISTING ☐ REPLACE

SYSTEMS:

☐ WARM AIR HEATING: ☐ STEAM HEATING: ☐ COMB. HEATING/AIR CONDITIONING:
  ☐ FORCED AIR ☐ RADIATION ☐ AIR/AIR
  ☐ GRAVITY ☐ FAN COIL UNITS ☐ AIR/HOT WATER
  ☐ UNIT (Suspended) ☐ OTHER CHILLED WATER/HOT WATER

☐ HOTWATER HEATING: ☐ AIR CONDITIONING: ☐ COOLING - EVAPORATIVE
  ☐ BASEBOARD ☐ CENTRAL ☐ VENTILATING
  ☐ PANEL (Radiant) ☐ WINDOW ☐
  ☐ FAN COIL UNITS ☐ COM. EXHAUST SYSTEM (Areas Served): [ ]

EQUIPMENT:

☐ FUEL:
  ☐ NATURAL GAS ☐ OIL ☐ TYPE B ☐ TYPE L
  ☐ OTHER ☐ MASONRY CHIMNEY ☐ CENTRAL ☐ ROOFTOP
  ☐ METAL CHIMNEY ☐ EXHAUST FANS (Over 1200 CFM): No ☐ CABINET
  ☐ FURNACE(S): No ☐; BTU ☐ ☐ VENT FANS (Over 1200 CFM): No ☐
  ☐ BOILER(S): No ☐ ☐ GAS LOG: Mfg ☐, BTU ☐
  ☐ WATERHEATER: BTU ☐ ☐ GAS FPL: Mfg ☐, BTU ☐
  ☐ FIREPLACE: ☐ CABINET ☐ EVAPORATIVE COOLERS: No ☐
  ☐ OTHER MASONRY ☐ MECHANICAL ☐ GAS INSERT: Mfg ☐, BTU ☐
  ☐ OTHER EQUIPMENT: (Describe): [ ]

REMARKS:

[ ]

[ ]

[ ]