# MECHANICAL INSPECTOR
## TECHNICAL SECTION

Date Received
Control #

Date Issued
Permit #

**A. IDENTIFICATION—APPLICANT:** COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block _____ Lot _____ Qualification Code _____

Work Site Location _____

_____

Owner in Fee: _____

Tel. _____ _____ e-mail _____

Address _____
street municipality zip code

Contractor: _____ Tel. _____ _____

Address _____ e-mail _____

_____

Contractor License No. or Builder Registration No. _____ Exp. Date _____

Home Improvement Contractor Registration No. or Exemption Reason _____

Federal Emp. ID No. _____ FAX: _____ _____

**B. MECHANICAL CHARACTERISTICS**

**Use Group** Present: Proposed:

**Heating System work:** [ ] New *OR* [ ] Modification to Existing *OR* [ ] Conversion *OR* [ ] Replacement

Type: [ ] Hydronic [ ] Hot Air

Fuel Type: [ ] Gas [ ] Oil [ ] Electric [ ] Solar [ ] Other _____

Estimated Cost of Mechanical Work $ _____

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW
[ ] No Plans Required
[ ] Mechanical Plans Approved
Date:_____ Approved by: _____
Joint Plan Review Required:
[ ] Bldg. [ ] Elec. [ ] Plumb. [ ] Fire.
[ ] Elev.
SUBCODE APPROVAL for PERMIT
Date: _____
Approved by: _____
SUBCODE APPPROVAL for CERTIFICATE
[ ] CA [ ] CCO
Date: _____
Approved by: _____

| INSPECTIONS Type: | DATES Failure | Failure | Approval | Initial |
|---|---|---|---|---|
| Gas Piping | | | | |
| Appliance | | | | |
| Chimney/Vent | | | | |
| Oil Piping | | | | |
| Oil Tank | | | | |
| LPG Tank | | | | |
| Hydronic Piping | | | | |
| Fireplace | | | | |
| Chimney Cert. | | | | |
| Other _____ | | | | |

**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.

Sign here: _____

Print name here: _____

**D. TECHNICAL SITE DATA**

DESCRIPTION OF WORK

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

| | |
|---|---|
| Administrative Surcharge | $ _____ |
| Minimum Fee | $ _____ |
| State Permit Surcharge Fee | $ _____ |
| **TOTAL FEE** | $ _____ |



Applicant: When submitting this form to your Local Construction Code Enforcement Office, please provide one original plus three photocopies.