MECHANICAL PERMIT APPLICATION

CITY OF SILVIS

PERMIT NO.

No.

2

Applicant to complete numbered spaces only.

JOB ADDRESS

1 LEGAL DESCR — LOT NO. | ELK | TRACT | (☐ SEE ATTACHED SHEET)

2 OWNER | MAIL ADDRESS | ZIP | PHONE

3 CONTRACTOR | MAIL ADDRESS | PHONE | LICENSE NO.

4 ARCHITECT OR DESIGNER | MAIL ADDRESS | PHONE | LICENSE NO

5 ENGINEER | MAIL ADDRESS | PHONE | LICENSE NO

6 LENDER | MAIL ADDRESS | BRANCH

7 USE OF BUILDING

8 **Class of work:** ☐ **NEW** ☐ **ADDITION** ☐ **ALTERATION** ☐ **REPAIR**

9 **Describe work:**

SPECIAL CONDITIONS;

APPLICATION ACCEPTED BY | PLANS CHECKED BY | APPROVED FOR ISSUANCE BY

NOTICE

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 HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT (DATE)

SIGNATURE OF OWNER (IF OWNER BUILDER) (DATE)

Type of Fuel: ☐ **Oil** ☐ **Nat. Gas** ☐ **Lpg**

PERMIT FEES

No.	Type of Equipment	Fee
	Forced Air Systems -- Btu/h M Ea. $	
	Gravity Systems -- Btu/h M Ea.	
	Floor Furnaces	
	Wall Heaters	
	Unit Heaters	
	Gas-fired A.C. Units -- Btu/h	
	Air-cond. Units -- Hp Ea.	
	Refrigeration Units -- Hp Ea.	
	Boilers -- Hp Ea.	
	Air-handling Unit -- C.F.M	
	Evaporative Coolers	
	Ventilation Fan	
	Range Hood	
	Incinerator	
	Clothes Dryer	
	PERMIT $	
	TOTAL FEE $	

WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT

PLAN CHECK VALIDATION CK. M.O. CASH **PERMIT VALIDATION** CK. M.O. CASH

WHITE - CITY CLERK **PINK - APPLICANT** **GOLDEN - TEMP FILE** **YELLOW - STREET FILE**