

**MECHANICAL PERMIT # \_\_\_\_\_**

**JURISDICTION OF THE CITY OF MADISONVILLE**

Applicant to complete numbered spaces only

Job Address \_\_\_\_\_

Legal Description	Blk. No.	Tract		
Owner	Mail Address	Zip	Phone	
Contractor	Mail Address	Zip	Phone	
Architect or Designer	Mail Address	Zip	Phone	
Engineer	Mail Address	Zip	Phone	

Use of Building \_\_\_\_\_

Class of Work:	New	Addition	Alteration	Repair	Move	Remove
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Describe Work: \_\_\_\_\_

Special Conditions: \_\_\_\_\_

Application Accepted by	Plans Checked by	Approved for Issuance by
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NOTICE	PERMIT FEES		
	Type of Fuel No.	Oil Type of Equip.	Nat. Gas LPG Fee
This permit becomes null and void if work or construction authorized is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced. 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.	_____	Air Cond. Units-H.P. Ea.	_____
	_____	Refrigeration Units-H.P.Ea.	_____
	_____	Boilers-H.P.Ea.	_____
	_____	Gas Fired A.C. Units-Tonnage Ez.	_____
	_____	Forced Air Sys. B.T.U.	_____
	_____	Gravity Sys. B. T. U.	_____
	_____	Floor Furnaces-B. T. U.	_____
	_____	Wall Heaters-B.T.U.	_____
	_____	Unit Heaters-B.T.U.	_____
	_____	Evaporative Coolers	_____
	_____	Clothes Dryers	_____
	_____	Ventilation Fan	_____
	_____	Range Hood	_____
	_____	Air Handling Unit	_____

Signature of Contractor or Agent \_\_\_\_\_ Date \_\_\_\_\_

Signature of Owner (If Owner Builder) \_\_\_\_\_ Date \_\_\_\_\_

Total Fee \$ \_\_\_\_\_

Amount Paid \_\_\_\_\_  
 Check or Cash \_\_\_\_\_  
 Check Number \_\_\_\_\_  
 Receipt Number \_\_\_\_\_  
 Date of Payment \_\_\_\_\_  
 Clerk's Initials \_\_\_\_\_