MECHANICAL PERMIT APPLICATION

FOR BUILDING PERMIT _____
OR PARCEL #_____

DEPOSITORY ACCOUNT NUMBER_____

OWNER_____

JOB ADDRESS_____

GENERAL CONTRACTOR_____

USE OF BUILDING: ☐ Single Family ☐ Multi-Family ☐ Commercial ☐ Mobile Home ☐ Other

SCOPE OF WORK:
☐ New Installation ☐ *Change-out ☐ Repair ☐ Other

LIST ALL EQUIPMENT TO BE INSTALLED

NO.	TYPE OF EQUIPMENT	Model	Manufacturer	BTU/KW	SEER/ARI
	Air Conditioner/Condenser				
	Air Handler/Evaporator				
	Commercial Kitchen Hood				
	Forced Air Systems				
	Evaporative Cooler				
	Refrigeration Unit				
	Boiler				
	Other:				

AN ADDITIONAL FEE WILL BE ACCESSED ON EACH COMMERCIAL KITCHEN HOOD FOR THE FIRE SERVICE REVIEW AND INSPECTION DIVISION

TOTAL VALUE OF CONTRACT $_____ **PHONE#**_____
QUALIFYING BUSINESS NAME_____
MECHANICAL CONTRACTOR'S NAME (print) _____
SIGNATURE_____**ADDRESS** _____
LICENSE: STATE#_____**COUNTY#**_____

Notary as to Contractor:
In St. Johns County, Florida
The forgoing instrument was acknowledged before me this _____ day of _____, 20_____.

_____ Stamp:
Notary Signature

Known Personally ____ or Identification _____ Type of Identification_____

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.