

MECHANICAL PERMIT APPLICATION

City of Carroll, Iowa

Applicant to complete numbered spaces only.

1. Address			
2. Owner	Mail Address	Phone	
3. Contractor	Mail Address	License #	Phone
4. Architect or Designer	Mail Address	License #	Phone
5. Engineer	Mail Address	License #	Phone
6. Use of Building			
7. Class of Work			
NEW <input type="checkbox"/>	Addition <input type="checkbox"/>	Alteration <input type="checkbox"/>	Repair <input type="checkbox"/>

8. Describe Work

<p style="text-align: center;">NOTICE</p> <p>THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 120 DAYS OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 120 DAYS AT ANY TIME AFTER WORK IS COMMENCED.</p> <p>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 THE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.</p>	Type of fuel: Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> L.P.G. <input type="checkbox"/>		
	PERMIT FEES		
	No.	Type of Equipment	FEE
Signature of owner or authorized agent _____ Date _____		Air Cond. Units - H. P. Ea.	\$6.13
		Refrigeration Units - H. P. Ea.	\$6.13
		Boilers - H. P. Ea.	\$12.12
		Gas Fired A.C. Units - Tonnage Ea.	\$6.13
		Forced Air Systems - B.T.U. M Ea.	\$6.63
		Gravity Systems - B.T.U. M Ea.	\$6.63
		Floor Furnaces - B.T.U. M Ea.	\$6.63
		Wall Heaters - B.T.U. M Ea.	\$6.63
		Unit Heaters - B.T.U. M Ea.	\$6.63
		Evaporative Coolers	\$6.13
		Clothes Dryers	\$4.25
		Ventilating Fan	\$4.75
		Range Hood	\$4.75
		Air Handling Unit C.F.M.	\$4.75
		Residential Incinerator	\$8.13
		Commercial Incinerator	\$33.25
		Gas Piping to Four Fixtures	\$2.75
		Each Additional Attachment	\$.50
Signature of owner (if owner builder) _____			
Application accepted by _____ Date _____			
Approved by _____ Date _____			Fee 22 00
			Total Fee

White - City Yellow - Applicant