

Martin County Inspections
MECHANICAL PERMIT APPLICATION

REQUEST DATE: _____/_____/_____

CONTRACTOR: _____ **Lic#** _____

Addr: _____

Phone #: _____ **Fax #:** _____

Permit Holder: _____ **Phone#:** _____

Job Addr#: _____

Job Type: **New System** **Change-Out Unit** **Gas Piping** **Duct Repl. Only**
(circle one)

System Type: **Gas Pack** **Heat Pump** **Geo-Therm** **Gas Furnace** **Oil Furnace**
 Dual Fuel **Electric Furnace** **A/C Only** **Refrigeration**

Number of Systems to be Installed: _____ **Split system:** **yes** **no** **#** _____

Heating & Air: _____ tons total **X \$14 =** _____

A/C or Refr. Only: _____ tons total **X \$12 =** _____

Heat Only: _____ BTU total/50,000 **X \$12=** _____

Duct Replacement: _____ Sq ft of Structure **X \$.02=** _____

(Circle if added) **Gas Piping: \$30** **Dual Fuel Meter: \$30**

PERMIT TOTAL:----- \$ _____

Comments: _____