



RESIDENTIAL MECHANICAL PERMIT APPLICATION

Project Address: _____

Building Permit Number: _____

Property Owner: _____

Owner E-Mail: _____

Master Permit Number: _____

Subdivision & Lot: _____

Residential Builder: _____

Instructions: Mechanical work can only be performed by persons licensed and bonded in St. Louis County and/or State of Missouri. **The mechanical contactor(s) and sub-contractor(s) must describe their scope of work, sign, and return this form to the City of Maryland Heights Community Development Department before mechanical work commences and inspections are performed.** All of the contractors may sign the same form prior to returning, or copies of the form may be provided to each individual contractor to sign and return. If drawings or plans are not required, you may submit this form by e-mail to mep@marylandheights.com.

To apply, submit the following:

1. Completed application
2. \$50 fee
3. 3 copies of drawings or plans (if applicable—see https://www.marylandheights.com/process/mechanical_permits.php)

BY COMPLETING THIS APPLICATION, I CERTIFY THAT I AM THE OWNER IN FEE OR AGENT AUTHORIZED TO APPLY FOR THIS PERMIT, THAT I HAVE AN AGREEMENT WITH THE OWNER/LESSEE TO PERFORM THIS WORK, AND THAT I AM AUTHORIZED TO AND DO CONSENT TO ENTRY ONTO THE PREMISES BY CITY OF MARYLAND HEIGHTS EMPLOYEES FOR INSPECTION OF WORK PERFORMED UNDER THIS PERMIT.

CONTRACTOR #1

Description of work: _____

Contractor Name: _____

Company: _____

Address: _____

Phone: _____

E-Mail: _____

License #: _____

Signature: _____

Date: _____

CONTRACTOR #2

Description of work: _____

Contractor Name: _____

Company: _____

Address: _____

Phone: _____

E-Mail: _____

License #: _____

Signature: _____

Date: _____

PLEASE RETURN SIGNED COPY.

Note: Permit will not be issued until this document is received.