



HVAC PERMIT APPLICATION

Date: _____ Residential Commercial

Job Site Address: _____

Owner's Name: _____

Owner's Address: _____

Owner's Email: _____ Phone: _____

Tenant (if different from owner): _____

Tenant Email: _____ Phone: _____

GA. HVAC Contractor: _____ License #: _____

Contractor's Company Name: _____

Address: _____

Email: _____ Phone: _____

Cost of Work: \$ _____

FEE CALCULATION

	Fees	# of Units	TOTAL
For issuing each permit	25.00		25.00
Up to \$1,000.00 of valuation of installation	25.00		
For each additional thousand or fraction thereof	3.00 per		
Account # 110.50.1200.321.22		TOTAL	

****IF THIS PERMIT IS BEING REQUESTED IN CONJUNCTION WITH A BUILDING PERMIT THAT HAS NOT YET BEEN APPROVED, THIS TRADE PERMIT MAY NOT BE VALID OR TRADE PERSON IS WORKING AT HIS/HER OWN RISK.***

HVAC Contractor Signature