

1. PROJECT INFORMATION

RESIDENTIAL PROPERTY

COMMERCIAL PROPERTY- PROVIDE VALUATION OF MECHANICAL JOB \$ _____

ADDRESS: _____

DESCRIBE WORK : _____

THIS MECHANICAL JOB IS PART OF A BUILDING PROJECT: YES NO

IF YES, PROVIDE BLDG. PERMIT NO.: _____

NOTE: MECHANICAL VENT HOOD REQUIRES DRAWINGS FOR REVIEW PRIOR TO PERMIT ISSUANCE.

2. PROPERTY OWNER:

NAME: _____ PHONE NO.: _____

MAILING ADDRESS: _____

E-MAIL: _____

3. MECHANICAL CONTRACTOR:

COMPANY NAME: _____ PHONE NO.: _____

E-MAIL: _____ FAX: _____

MAILING ADDRESS: _____

CONTACT PERSON'S NAME: _____ PHONE NO.: _____

4. NOTES TO APPLICANT:

NOT A VALID PERMIT UNTIL CONTRACTOR IS NOTIFIED OF APPROVAL AND ALL APPLICABLE FEES ARE PAID IN FULL.

- CERTIFICATE OF GENERAL LIABILITY INSURANCE AND STATE LICENSE MUST BE CURRENT WITH STATE OF TEXAS AND CITY OF LA PORTE. PROVIDE CERTIFICATE OF GENERAL LIABILITY INSURANCE WITH CITY OF LA PORTE AS CERTIFICATE HOLDER AND STATE LICENSE TO REGISTER (NO ADDITIONAL FEE).
- MECHANICAL PERMIT REQUIRES A LICENSED HVAC CONTRACTOR FOR PERMIT ISSUANCE.
- RE-INSPECTION FEE: (RESIDENTIAL \$10.00); (COMMERCIAL \$35.00)
- PERMIT FEE: (RESIDENTIAL \$10.00 FLAT FEE); (COMMERCIAL: BASED ON MECH. VALUATION)
- COMPLETE APPLICATION AND ALL SUPPORTING DOCUMENTS ARE REQUIRED PRIOR TO PERMIT ISSUANCE.

APPLICANT SIGNATURE: _____

PRINTED NAME: _____ DATE: _____

STAFF USE ONLY

APPROVED FOR ISSUANCE BY: _____ DATE: _____

PERMIT NO. : _____ TOTAL PERMIT FEE: _____