

CITY OF HOISINGTON MECHANICAL PERMIT

LOCATION OF BLDING STREET # _____ NAME _____ TYPE _____ DIR. _____
 APPLICATION DATE: _____
 PERMIT #: _____ RECEIPT #: _____ LOT: _____ WARD/SUBD: _____
 ZONING: _____ SIDEWALK REQUIRED: Yes No HISTORIC: Interior Exterior Both
 OCCUP. GROUP: _____ DIVISION: _____ CONST. TYPE: _____ FLOOD PLAIN: _____
 PROP. USE: _____ Type of Improvement: _____

NO.	TYPE OF EQUIPMENT	
[]	Air cond.Units - Tons Ea.	Ton - Ea.
[]	Refrigeration Units - H.P. Ea.	H.P. - Ea.
[]	Boilers - B.T.U. Ea.	M - Ea.
[]	Forced Air Systems - B.T.U. Ea.	M - Ea.
[]	Floor Furnaces - B.T.U. Ea.	M - Ea.
[]	Wall Heaters - B.T.U. Ea	M - Ea.
[]	Unit Heaters -B.T.U. Ea.	M - Ea.
[]	Air Handling Unit - CFM Ea.	CFM - Ea.
[]	Commercial Range Hood CFM	CFM - Ea.
[]	Hood Fire Ex. System	NO. of Heads

**CALL FOR
INSPECTIONS
(620)-653-4125**

Comments:

Estimated Date of Completion

COST OF EQUIPMENT \$ _____

Total Mechanical Permit Fee []

IDENTIFICATION (To be completed by all Applicants):

Name _____ Phone _____

Owner: _____

Contractor: _____

I, the owner/contractor of this property, agree to conform and will require of my contractor(s) to conform to all applicable laws of this Jurisdiction

Property Owner: _____ Address: _____

<u>Fire Department</u>	<u>Code Services</u>	<u>Planning</u>
<input type="radio"/> Approved <input type="radio"/> Disapproved	<input type="radio"/> Approved <input type="radio"/> Disapproved	<input type="radio"/> Approved <input type="radio"/> Disapproved