

Date : _____
 Valuation \$ _____
 Add \$5.00 Tech Fee _____
 Permit Fee \$ _____
 Cash Check # _____
 Permit: # _____

Contractor _____
 Phone _____

**CITY OF LORAIN – DIVISION OF BUILDING
 H. V. A. C. PERMIT APPLICATION**

Per Lorain City Council, As of January 2, 2019 - add \$5.00 [TECHNOLOGY FEE] to final permit cost

Owner: _____ **Phone #** _____

Address Site of Work _____

INSTALLATION INFORMATION

I. TYPE OF WORK: NEW REPLACEMENT REPAIR

II. PROPERTY TYPE: RESIDENTIAL NON-RESIDENTIAL OTHER

- | | | |
|---|---|---|
| <input type="checkbox"/> Forced Air Furnaces | <input type="checkbox"/> Incinerators | <input type="checkbox"/> Air Handling Units |
| <input type="checkbox"/> Unit Heaters | <input type="checkbox"/> Boilers | <input type="checkbox"/> Heat Pump |
| <input type="checkbox"/> Gas/oil Conversions | <input type="checkbox"/> Coil Units | <input type="checkbox"/> Air Cleaners |
| <input type="checkbox"/> Space Heaters | <input type="checkbox"/> Window A/C Units | <input type="checkbox"/> Kitchen Exhaust Hood |
| <input type="checkbox"/> Gravity Furnaces | <input type="checkbox"/> Split System A/C | <input type="checkbox"/> Hazardous Exhaust Sys. |
| <input type="checkbox"/> Solid Fuel Appliance | <input type="checkbox"/> A/C compressors | <input type="checkbox"/> Electric Furnace |
| <input type="checkbox"/> Coal Stokers | <input type="checkbox"/> Humidifiers | <input type="checkbox"/> De-humidifiers |
| | | <input type="checkbox"/> Roof Top Unit |

No. of Units _____ Size of Units _____

DESCRIPTION OF WORK TO BE PERFORMED: _____

NOTE: If Air Conditioner or Heat Pump Units are to be located in side yard, affidavits of "NO OBJECTION" must be furnished by abutting owner.

I CERTIFY THAT I AM THE OWNER OF THE ABOVE PROPERTY, THAT THE ABOVE STATEMENTS ARE TRUE AND THAT THE WORK WILL BE PERFORMED ONLY BY MYSELF, PER ORD. 118-96, SECTION III - 1.

Owner

I CERTIFY THAT I AM AUTHORIZED BY THE OWNER OF THE ABOVE PROPERTY TO OBTAIN THE DESCRIBED PERMIT; THAT THE ABOVE STATEMENTS ARE TRUE AND THAT THE WORK WILL BE PERFORMED BY CONTRACTOR (S) WHO IS/ARE REGISTERED WITH THE CITY OF LORAIN BUILDING DEPARTMENT.

Authorized Representative