



MECHANICAL

PERMIT APPLICATION
 COUNTY OF HENRICO, VIRGINIA
 DEPARTMENT OF
 BUILDING CONSTRUCTION AND INSPECTIONS
 4301 E. PARHAM ROAD * HENRICO, VA 23228
 P.O. BOX 90775 * HENRICO, VA 23273-0775
 www.co.henrico.va.us/bldg
 PHONE (804) 501-4360 * FAX (804) 501-4984



October 1, 2013

APPLICATION DATE:	NO WORK SHALL COMMENCE PRIOR TO OBTAINING A PERMIT! It is understood that all work and material used in this installation shall conform strictly with the Virginia Uniform Statewide Building Code and applicable County Codes and that the permit will be void if work is not commenced within 6 months from date of issue, or the work is suspended/abandoned for 6 months.
MECHANICAL PERMIT NUMBER:	
BUILDING PERMIT NUMBER:	

JOB LOCATION	STREET ADDRESS	OWNER <small>An Owner's Affidavit form shall be submitted if the owner/lessee will assume responsibility for the proposed work. Contact our office or visit our website to obtain a copy of this form.</small>	NAME						
	JOB SITE NAME		ADDRESS						
SUB-CONTRACTOR	COMPANY NAME		CITY	ST	ZIP				
	ADDRESS		WORK PHONE			FAX			
	CITY		HOME OR CELL PHONE						
	PHONE		E-MAIL						
	E-MAIL		BUILDER/GENERAL CONTRACTOR						
	MASTER TRADESMAN CARD NO.						VIRGINIA CONTRACTOR'S LICENSE NO.		
	MASTER TRADESMAN SIGNATURE						COMPANY NAME		
	MASTER TRADESMAN PRINTED NAME						ADDRESS		
		CITY	ST	ZIP					
		PHONE		FAX					
		E-MAIL							

ASBESTOS CERTIFICATION	I hereby certify that the portions of the building affected by the proposed work have been inspected / tested and any response actions taken shall comply with NESHAP and OSHA standards or exempt from these standards. _____ SIGNATURE OF OWNER / APPLICANT _____ PRINTED NAME OF OWNER / APPLICANT
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MECHANICAL PERMIT FEE SCHEDULE		PERMIT FEE	
New One and Two Family Dwellings - \$100		Permit Fee	
ALL OTHER PERMITS		* State Levy Tax	
Value of Work	FEE	Total	
\$0 - \$5,000	\$100	→	
Residential work over \$5,000 \$100 plus \$6/\$1,000 or fraction thereof.			
Commercial work over \$5,000 \$100 plus \$7/\$1,000 or fraction thereof.			
* Levy percentage is subject to change. For current percentage, contact our office or visit our website.			

DESCRIPTION OF WORK	COMMERCIAL <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> (Briefly describe the work to be performed)
	ESTIMATED COST
	APPROVAL
	VOUCHER NO.
	CHECK NO.

This is to certify that the estimated cost set forth on the referenced permit, for the purpose of determining the applicable permit fee, is true and it is determined by the actual cost to the owner of all labor and materials. INITIALS: _____

DESCRIPTION OF EQUIPMENT/SYSTEM TO BE PROVIDED AND/OR INSTALLED	FURNACE / HEATER		VENTILATING / EXHAUST							
	BOILER		CHIMNEY / VENTS							
	COOLING EQUIPMENT		REFRIGERATION TYPE							
	CHECK ITEMS BELOW APPLICABLE TO JOB	✓	GAS APPLIANCES	TOTAL ALL GAS APPLIANCES	FUEL TYPE	HEAT TYPE	DUCT TYPE	FIRE PROTECT	ELE-VATORS	AUTO/MATERIAL LIFT
			NO.							
	INSTALLATION - NEW	✓	BOILER		ELECTRIC	HOT WATER	AIR CONDITIONER	ABOVE GROUND	HYDRAULIC	AUTO LIFT
			CLOTHES DRYER		GAS (LP)	STEAM	HEATING	UNDER GROUND	TRACTION	MATERIAL LIFT
	ALTERATION	✓	RANGE W-W/O OVEN		GAS (NATURAL)	HEAT PUMP	EXHAUST	TANKS	OTHER	OTHER
			GAS WATER HEATER		OIL	WOOD STOVE	COMMERCIAL HOOD / EXHAUST			
	REPAIR	✓	GAS LOGS		WOOD			ABOVE GROUND		
REPLACEMENT	✓	FURNACE		OTHER			UNDER GROUND			
GAS PIPING	✓	GENERATOR								
OTHER	✓	OTHER								
		TOTAL					TYPE			