CITY OF DECATUR MECHANICAL APPLICATION

This application is intended to be a sub sheet for: An individual job CITY JOB		
Part of a General Building permit		
PLEASE TYPE OR PRINT		
The undersigned is the ownerdescribed real property located at:	_duly authorized agent	_of the following
Address		Zip
Owner's Name and hereby applies for a Mechanical permit for:	Address	Zip
Single-FamilyDuplexMult	ple DwellingCommercial	Industrial
Furnace NewReplaceRepairAir Conditioner/Handler NewReplace Boiler Commercial Hood Exhaust System Sprinkler		
Electrical Contractor (if new conditioner)		
Size of Electrical Service	Calculated Load	
Cost of work \$ Name of Contact Person		
All work is to be inspected before it is concealed and when it is completed.		
Mechanical Contractor	Address	
CitySta	ate	Zip
Phone		
Mechanic/Installer		
License Number Method of payment: Check Credit Memo *E-Pay *Please provide phone number and/or email address for permit # verification:		
Email Phone Number ()		
The above is a true and accurate description of the work and cost thereof.		
Signature		
Date		

Credit Card payment can be made on-line at <u>www.decaturil.gov</u> (You must have a permit # to use E-Pay.) 12/14/2005