

**APPLICATION FOR MECHANICAL PERMIT
CITY OF ZION-BUILDING DEPARTMENT
(847) 746-4018**

JOB LOCATION: Number and Street: _____

PROPERTY OWNER: _____ **PHONE:** _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

GENERAL CONTRACTOR: _____ **PHONE:** _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

MECHANICAL CONTRACTOR: _____ **PHONE:** _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

Best email contact: _____

Check or fill out what applies:

Square footage of area: _____ **(Heat/Air Conditioned)**

Furnace: Install New _____ Replace _____
BTU input/output _____ / _____
Type _____

Air Conditioning: Install New _____ Replace _____
Size _____ **Seer:** _____ **Roof top unit:** _____

Boiler: Install New _____ Replace _____

Repair Details and/or Other Details of Construction:

ESTIMATED VALUE OF MECHANICAL WORK: \$ _____

If no work is performed hereunder within six months from the date a permit is issued or if the work is not completed within one year from the date a permit is issued, the mechanical permit shall expire by limitation as provided by City code. The undersigned applicant agrees to comply with all provisions of the mechanical ordinance of the City of Zion and with the provisions of all other law relating to the erection, repair, and alteration of buildings in effect at the date of the permit issued hereunder. The said applicant herewith agrees not to make any changes in the plans or specifications, as approved, without first obtaining further approval for such changes from the building inspector.

I hereby certify that I have read the mechanical section of the Municipal Code and know the contents thereof.

Signature of Mechanical Contractor

Date

(for office use only)

PERMIT NO. ME- _____ - _____ DATE PERMIT ISSUED: _____

PERMIT FEE: \$ _____