



HVAC PERMIT APPLICATION

OFFICE USE ONLY	
PERMIT NUMBER:	PERMIT FEE:
PM _____	\$ _____

*** MINIMUM FEE IS \$75.00 ***

ACCEPTANCE OF FEE DOES NOT CONSTITUTE APPROVAL OF PERMIT

JOB SITE INFORMATION	
ADDRESS: _____	
OWNER: _____	
NAME OF BUSINESS OR SUBDIVISON: _____	
PHONE # : _____	EMAIL : _____
WORK DESCRIPTION: _____	
CONTRACTOR INFORMATION	
COMPANY NAME: _____	
COMPANY ADDRESS: _____	
CITY: _____	STATE: ____ ZIP: _____
PHONE: _____	EMAIL: _____
* GA STATE LICENSE #: _____	EXPIRES: _____
* BUSINESS LICENSE #: _____	EXPIRES: _____
JURISDICTION ISSUED: _____	
* PHYSICAL COPIES NEEDED	

DESCRIPTION OF ITEM	AMOUNT PER UNIT	QTY	TOTAL
FURNACE	\$50.00		
AIR HANDLER	\$50.00		
EVAPORATOR COIL (ONLY APPLIES FOR CHANGE-OUTS)	\$50.00		
CONDENSER UNIT	\$50.00		
HEAT PUMP	\$50.00		
PACKAGE UNIT	\$100.00		
ROOF-TOP UNIT	\$100.00		
MISC. / NOT LISTED (DESCRIBE):	\$50.00		
* MINIMUM FEE IS \$75.00 *	TOTAL: \$		