



APPLICATION FOR HVAC BUILDING PERMIT

360 South Yearling Road, Whitehall, Ohio 43213
(Phone) 614-237-8612 (Fax) 614-338-3119 www.whitehall-oh.us

Application #: _____ Date & Time: _____

[] RESIDENTIAL [] COMMERCIAL

Project Address

Table with 4 columns: Address, City (Whitehall), State (Ohio), Zip (43213)

Parcel # (Business) Name

Owner's Name Owner's Address City State Zip

Owner's Phone Owner's E-mail

Contractor's Name [] N/A Contractor's Address City State Zip

Contractor's Phone Contractor's E-mail

HEATING

Energy source: [] Electric [] Natural Gas [] LPG
Type of equipment: [] Forced [] Gravity [] Wall [] Unit [] Boiler [] Radiator [] Swimming Pool
Number of supply air openings: _____ Return air openings: _____
Number of units: _____ [] New [] Replacement

AC/REFRIGERATION

Type of equipment: [] A/C [] Refrigeration [] New [] Replacement
Number of units: _____ Horse power each : _____

VENTILATION

Type of equipment: [] Exhaust Fan(s) # _____ [] Commercial Hood [] Air Handling Unit [] CFM

PIPING

Type of equipment: [] HVAC [] Hydronics [] Plumbing [] Refrigeration Number of valves or appliances: _____

Describe project: _____

COST OF PROJECT \$ _____



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CERTIFICATION (read all sections, sign, date and attach any drawings and/or supporting documents)

All permits shall expire one year from the date of issue. A one-time renewal shall be permitted if the original permit has not expired. I fully understand that no excavation, construction, structural alteration, electrical or mechanical installation or alteration of any building, structure, sign, or part thereof and no use of the above shall be undertaken or performed until the permit applied for herein has been approved and issued by the City of Whitehall Building/Zoning Department.

I hereby certify that I am the owner of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to submit this application and attachments as his/her authorized agent and I agree to conform to all applicable laws of the jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s).

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE LISTED INSTRUCTIONS.

 Applicant Signature Please Print Clearly Date

 Applicant's Phone Applicant's E-mail

Applications can be submitted by e-mail to building-department@whitehall-oh.us or fax to 614-338-3119. You will be contacted after fees have been calculated.

STOP – OFFICE USE ONLY

Heating fees	\$
A/C or Refrigeration fee	\$
Ventilation fee	\$
Piping fee	\$
Commercial plan review	\$
1% (residential) Or 3% (commercial) of above fees	\$
\$25.00 service fee	\$25.00
TOTAL FEES	\$

(check, money order and cash only)

APPROVED DISAPPROVED, LETTER ATTACHED CONDITIONAL APPROVAL, LETTER ATTACHED

Chief Building Official: _____ Date: _____