Town of Plymouth
MECHANICAL PERMIT APPLICATION

Application Date:

OWNER INFORMATION	CONTRACTOR INFORMATION
Name:	Name:
Address:	Address:
Phone #	Phone #
	Lic. No.:
	Type:

SITE INFORMATION
Location:
Street:
Building Type:
Building Use:
Est. Cost:

JOB DESCRIPTION

☐ LPG	☐ Electric
☐ Oil	☐ Gas
☐ New	☐ Alteration
☐ Repair	☐ Addition

MECHANICAL FIXTURES

Air Conditioners Tons :	Forced Air Sys. BTU:	Conversion Burner:
Refrigeration Units :	GravitySystem BTU:	Clothes Dryer:
Boilers Type:	Floor Furnace BTU:	Ventilation Fan:
Burner Type	Wall Heaters BTU:	Range Hood:
Type of Venting	Unit Heaters BTU:	Air Handling CFM:
Combustion Air		Gas Piping:
Heat Loss shall be submitted for Additions and New Construction		Commercial Range:
		Domestic Range:

THE FOLLOWING CONDITIONS ARE A PART OF THIS PERMIT:

APPLICANT CERTIFIES THAT ALL INFORMATION GIVEN IS CORRECT AND THAT ALL PERTINENT STATE AND LOCAL MECHANICAL ORDINANCES WILL BE COMPLIED WITH IN PERFORMING THE WORK FOR WHICH THIS PERMIT IS ISSUED.

Applicant's Signature **Building Official**

Fee $ _____ **Payment** _____ **Check Number** _____