



TOWN OF BELMONT

BUILDING DEPARTMENT

BUILDING OFFICIAL

Mechanical Permit Application

Date _____

Unit Owner _____

Map/Lot No. _____

Location of Work _____

Permit No. _____

Type of Building SFR. Multi-Unit MFG. Mod. Com.

Used As _____

Estimated Completion Date _____

Estimated Cost _____

Type of Work; New - Repair - Addition - Tank Change

Fuel Source; Gas - LPG - Electric

Item Number

Air Cond. Units H. P. Ea.	
Refrigeration Units H. P. Ea.	
Boilers H.P. Ea.	
Forced Hot Air System – BTU’s	
Floor Furnace – BTU’s	
Wall Heaters – BTU’s	
Unit Heaters – BTU’s	
Conversion Burner	
Close Dryer	
Ventilation Fan – CFM’s	
Range Hood	
Range - BTU’s	
Air Handler	
Incinerator	
Gas Piping (Type)	
Dishwasher	
Tank Change Out	
Existing Tank Size	
New Tank Size	
Other	

Contractor Name _____

Address _____

City _____ State _____ Zip Code _____

Phone # _____

Contractor License No. _____

Contact Building Inspector to schedule an inspection 267-8300 Ext.111
 No Inspections will be completed prior to the Building Inspector receiving a copy of the Pressure/Leak test. These results may be left on site protected from weather or faxed to 267-8307.

Applicant certifies that all information given is correct and that all pertinent Mechanical codes, standards and practices will be complied with in performing the work which this permit is issued.

Printed Name & Signature of Property Owner _____

Printed Name & Signature of Contractor or his/her Authorized Representative making Application _____

Signature of Permit Clerk _____

Permit Fee Due **\$25.00**
 AFTER THE FACT PERMIT FEES ARE DOUBLED

*** All Applications must contain a Piping Plan & Pipe sizing Calculations***

OFFICE USE ONLY	
Received By:	(Circle One) In System Yes No
Amount:	
Date:	
Payment method:	Check No. _____ Cash _____ Other _____