

Planning



Department

RESIDENTIAL MECHANICAL PERMIT APPLICATION

Address of Mechanical Project: _____

Name of Property Owner or Property Manager: _____

Phone Number of Property Owner or Property Manager: _____

Email of Property Owner or Property Manager: _____

Brief Description of Project: _____

Is this project for a single-family house? _____ If answering YES: Are you the homeowner of this single-family house and wishing to do the work yourself, without a contractor? _____ If answering YES to this as well, sign and print your name in the box below to accept responsibility for the work:

My signature here indicates that I am the homeowner and will be doing the work myself. I will not hire a contractor or any person to do this work. Any help I receive will be performed under my supervision. I will build this according to all applicable codes that the City of Horn Lake has adopted. I will take all responsibility for the quality of this construction. If the building inspector determines that I do not possess the necessary skills to build this project properly, then I will be ordered to stop working and will be required to hire a contractor that holds a license with the City of Horn Lake.

Homeowner Signature: _____

Printed Name of Homeowner: _____

Please Note: If the homeowner exemption box above was completed with the homeowner signature and the printed name of homeowner, then the fields below are not applicable and may remain blank, as there will be no contractor involved in construction. If the homeowner exemption box was not completed, then a licensed contractor must be hired, and all fields below must be completed.

Name of Contractor Company: _____

Address of Contractor Company: _____

Phone Number of Contractor Company: _____

Email of Contractor Company: _____

Contractor Signature: _____

Printed Name of Contractor: _____

Please indicate the quantity of each item below to the best of your ability and then write down the estimated dollar value of that item in the blank to the right of it. The fee for each line is \$30 for the first \$1,000 of valuation and \$4 for each additional \$1,000 of valuation or fraction thereof.

| DESCRIPTION | QUANTITY | VALUATION | FEE |
|------------------|----------|-----------|-------|
| Air Conditioning | | | |
| Boiler | | | |
| Duct Work | | | |
| Heating | | | |
| Refrigeration | | | |
| Vent Hood | | | |
| Water Heater | | | |
| Miscellaneous: | | | |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Total Mechanical Permit Fee: _____

FOR OFFICE USE ONLY

Payment Type: ___ Cash ___ Check ___ Card

Amount Paid: _____

Date: _____

Permit Number: _____