



Mechanical Permit Application

Jefferson County Code Enforcement

PO BOX 100 / 725 Maple Street

Hillsboro, MO 63050

Phone: 636-797-5310

Fax: 636-797-5077

Permit: _____ **Int.**

Date: _____

PROJECT INFORMATION & LOCATION:

Project Type: Residential Multi-family Commercial
 Structure Type: New Building Existing Building Repair/Replace Non-Habitable Temporary Structure

Project Address _____ City _____ Zip Code _____

Parcel # _____ - _____ - _____ - _____ - _____ Subd. _____ Lot # _____

OWNER INFORMATION:

Owner _____ Name _____ Phone # _____

Owner Address _____ Street Address _____ City _____ State _____ Zip Code _____

Tenant or Business Name _____ Existing New

ITEM:

NUMBER

FEE

Duct System (#Feet)	_____	_____
Heating	_____	_____
Cooling	_____	_____
Clothes Dryer Exhaust	_____	_____
Kitchen Exhaust	_____	_____
Bathroom Exhaust	_____	_____
Fireplace (s) Flue	_____	_____
Combustion Air	_____	_____
Water Heater Venting	_____	_____
Underground Piping	_____	_____
HVAC Unit	_____	_____
Boiler	_____	_____
Hood/Dump Test	_____	_____
Dampers	_____	_____
Cooling Tower	_____	_____
Solar System	_____	_____
Radiant Heating System	_____	_____
<u>Processing Fee</u>	_____	_____
<u>Inspection Fee</u>	_____	_____
<u>Total Permit Fee</u>	_____	_____

DIRECTIONS TO SITE:

NOTICE:

I understand if the information I have given above is not true, my permit may be revoked by the Jefferson County Code Enforcement, and I agree to abide by, and comply with, the conditions of all Building regulations/Code Ordinances.

CONTRACTOR/APPLICANT INFORMATION & CERTIFICATION:

Contractor/Applicant _____
 Business Name Applicant Name Certification # _____ Phone # _____

Contractor/Applicant Address _____ Street Address _____ City _____ State _____ Zip Code _____

Signature _____ Owner Contractor Applicant