



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 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	_____	_____
Combustion Air	_____	_____
Radiant Heating System	_____	_____
<u>Processing Fee</u>		_____
<u>Inspection Fee</u>		_____
<u>Total Permit Fee</u>		_____

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.

A FINAL INSPECTION MUST BE COMPLETED ON EVERY PERMIT. FAILURE TO COMPLY WILL RESULT IN THE **DISCONNECT OF ALL APPLICABLE UTILITIES, STOPPAGE OF WORK AND POSSIBLE LEGAL ACTION!**

CONTRACTOR/APPLICANT INFORMATION & CERTIFICATION:

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

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

Email address _____

Contractor Signature is required.

To expedite this application please include a completed Contractor Signature Form with this application