



CITY OF STONE MOUNTAIN HVAC PERMIT APPLICATION

ALL PERMITS MUST BE POSTED AT THE JOB ADDRESS

HVAC PERMIT # _____

INSPECTION LINE: 770-498-8984 - EXT. 145

All requests must be in 12:00 p.m. for a next day inspection

DATE ISSUED _____

ISSUED BY _____

REQUIRED ATTACHMENTS:

- STATE CARD BUSINESS LICENSE DRIVERS LICENSE
- HOMEOWNERS AFFIDAVIT PERMIT AGENT FORM

BLDG PERMIT # _____

Check Applicable Type:

- RESIDENTIAL (Single Family) RESIDENTIAL (Multi-Family) COMMERCIAL
- (Includes Townhomes & Condominiums) (Includes Apartments, Duplexes & Triplexes)

Check Applicable HVAC Information:

- NEW BUILDING ADDITION TO BUILDING EXPANSION TO EXISTING SYSTEM REPLACEMENT
- FIRE DAMAGE GAS LINE PRESSURE TEST (Maximum 10 lbs of pressure must be applied for test)

JOB ADDRESS _____

UNIT OR SUITE # _____ APT # _____ BLDG # _____ FLOOR # _____

CITY _____ STATE _____ ZIP _____ PARCEL # _____

HVAC, GENERAL CONTRACTOR OR PERMIT AGENT _____
(PRINT NAME)

ADDRESS _____ CITY _____ STATE _____ ZIP _____

EMAIL _____

MOBILE _____ TELE _____ FAX _____

HVAC OR GENERAL CONTRACTOR SIGNATURE
(MUST BE THE STATE CARD HOLDER)

PERMIT AGENT SIGNATURE
(AUTHORIZED PERMIT AGENT FORM MUST BE ATTACHED)

PROPERTY OWNER _____
(PRINT NAME)

ADDRESS _____ CITY _____ STATE _____ ZIP _____

EMAIL _____

MOBILE _____ TELE _____

PROPERTY OWNER SIGNATURE
(ONLY REQUIRED IF THE WORK IS BEING PERFORMED BY THE HOMEOWNER - HOMEOWNERS AFFIDAVIT MUCH BE ATTACHED)

TENANT NAME (IF APPLICABLE) _____ TELEPHONE # _____



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CHECK ALL SYSTEMS THAT APPLY:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> AIR CONDITION | <input type="checkbox"/> FLOOR FURNACE | <input type="checkbox"/> BATH FAN | <input type="checkbox"/> VENT ONLY |
| <input type="checkbox"/> GAS FORCED AIR | <input type="checkbox"/> WALL FURNACE | <input type="checkbox"/> VENTILATION FAN | <input type="checkbox"/> STEAM & HOT WATER |
| <input type="checkbox"/> ELECTRIC FORCED AIR | <input type="checkbox"/> SPACE HEATER | <input type="checkbox"/> RANGE HOOD | |

CHECK ALL THAT APPLY:

BOILERS AND HEATING APPLIANCES (BTU INPUT)

- Up to 300,000 NO ___
 300,000 to 1,000,000 NO ___
 1,000,001 and up NO ___
 Decorative Fire Place NO ___

VERTICAL GAS VENTS (BTU INPUT)

- Up to 100,000 NO ___
 101,000 and up NO ___
 Clothes Dryer Vents NO ___

A/C AND REFRIGERATION APPLIANCES (TONS)

- Up to 10 NO ___
 11 to 30 NO ___
 31 to 100 NO ___
 101 and up NO ___

RANGE HOODS (FACE AREA OR HOOD SQUARE FEET)

- Up to 10 NO ___
 11 to 25 NO ___
 26 to 100 NO ___
 101 and up NO ___
 Residential Hoods and Surface Range Units NO ___

VENTILATION FANS (MOTOR HP)

- Up to 1.5 NO ___
 1.5 to 10 NO ___
 11 to 20 NO ___
 21 and up NO ___
 Residential Vent Fans NO ___
 Powered Induction Boxes NO ___

OTHER

- Fireplace Lighters NO ___
 Gas Line (per connection) NO ___
 Duct Work NO ___
 Zone Dampers NO ___
 Fire Suppression System NO ___

Re-Inspection Fee for each inspection completed: \$50.00

Non-Refundable Fees Due:

- Administrative Fee \$50.00
 HVAC Permit Fee \$ _____
 (Minimum Fee - \$75.00)
 Penalty (If Applicable)
 100% of Permit Fee \$ _____
 Total Permit Liability \$ _____

HVAC PERMIT # _____
 DATE ISSUED _____
 ISSUED BY _____
 BLDG PERMIT # _____
 Date Paid _____