



# CITY OF SPRING VALLEY VILLAGE BUILDING PERMIT APPLICATION (MECHANICAL)



Phone: 713-465-8308 Fax: 713-461-7969

**Acceptable Forms of Payment: Cash, Check and Credit Card (3% additional fee for credit card payments)**

**PROOF OF GENERAL LIABILITY INSURANCE IS REQUIRED ON ALL PERMITS OBTAINED FROM THE CITY OF SPRING VALLEY VILLAGE WITH THE CITY STATED AS THE CERTIFICATE HOLDER ON THE "CERTIFICATE OF LIABILITY INSURANCE"; PER CHAPTER 3, SECTION 3.208 LIABILITY INSURANCE: SPRING VALLEY VILLAGE CODE OF ORDINANCES.**

JOB ADDRESS:		MASTER PERMIT #	
OWNER:		MAILING ADDRESS	TELEPHONE
CONTRACTOR		MAILING ADDRESS	TELEPHONE LICENSE #
E-MAIL ADDRESS:			
CLASS OF WORK :	NEW	ADDITION	ALTERATION REPAIR
DESCRIBE WORK:			
USE OF BUILDING:			
SPECIAL CONDITIONS:			
PLANS CHECKED BY:		APPROVED FOR ISSUANCE BY:	
<u>TYPE OF EQUIPMENT</u>	<u>NUMBER</u>	<u>TYPE OF EQUIPMENT</u>	<u>NUMBER</u>
A. C. Units - HP Each	_____	Forced Air Systems - Btu/h	_____
A.C. Units - Gas Fired - Btu/h	_____	Gravity Systems - Btu/h	_____
Air Handling Unit CFM	_____	Heaters-Wall	_____
Boilers - HP Each	_____	Heaters-Unit	_____
Clothes Dryer	_____	Range Hood	_____
Evaporative Coolers	_____	Refrigeration Units - HP Each	_____
Floor Furnaces	_____	Ventilation Fan	_____
<b>NOTICE</b>			
THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN <b>180 DAYS</b> .			
<b>A REINSPECTION FEE (\$75.00) WILL BE CHARGED IF INSPECTOR DOES NOT FIND A COPY OF THE VALIDATED PERMIT POSTED ON THE JOB SITE.</b>			
I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.			
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT		DATE	
SIGNATURE OF OWNER (IF OWNER BUILDER)		DATE	