

APPLICATION FOR HVAC PERMIT



CITY OF MIDDLEBURG HEIGHTS Division of Building

15700 BAGLEY ROAD, MIDDLEBURG HEIGHTS, OHIO 44130
Phone (440) 234-2218 • Fax (440) 234-9092
E-mail: building@middleburgheights.com

Date: _____

Application is hereby made for permit to do HVAC work as described in detail herein at the location given. Said work will be done in full compliance with all ordinances and rules and regulations of the building and zoning codes of Middleburg Heights pertaining thereto. We agree to notify the Division of Building to inspect all roughed in HVAC before covering, all equipment before occupancy.

Project Address _____ **Tenant (If Commercial)** _____

Property Owner Name _____ **Phone Number** _____

Property Owner Address: (If Different from Above) _____

Check All That Apply: Commercial Residential Replacement New Installation

Air Conditioning Furnace Thru-Wall Combo Unit

Rooftop Combo Unit Rooftop A/C Only Unit Furnace Boiler

Heat Pump Residential Ductless Split System

Briefly describe work if not listed above: _____

ESTIMATED COST OF WORK: \$ _____

NOTE: BEFORE ANY JOB IS STARTED, ALL CONTRACTORS MUST BE REGISTERED AND A PERMIT MUST BE APPROVED AND ISSUED. ANY JOB STARTED BEFORE APPROVAL AND ISSUANCE OF A PERMIT SHALL BE SUBJECT TO A PENALTY.

Contractor _____ **Contact Person** _____

Contractor Address _____

Phone _____ **Cell** _____ **E-mail** _____

AUTHORIZED SIGNATURE OF APPLICANT _____

APPROVAL:

BUILDING COMMISSIONER

DATE