

THE CITY OF PORTSMOUTH
MECHANICAL PERMIT APPLICATION
 DEPARTMENT OF PERMITS & INSPECTIONS

801 Crawford Street
 Portsmouth, VA 23704
 www.portsmouth.va.us/forms/forms.htm
 Tel. (757) 393-8531 FAX (757) 393-5108
 A PERMIT IS HEREBY REQUESTED TO INSTALL
 MECHANICAL ITEMS AT THE FOLLOWING PREMISES:

1. Address of Job: _____
2. Owner: _____ 3. Phone _____
4. Mechanical Contractor Trade Name: _____ Email: _____
5. Mechanical Contractor's Address: _____
- City: _____ ZIP: _____ 7. State License _____
- Class A No. _____
6. Mechanical Contractor's Phone Number: _____ Class B No. _____
- Class C No. _____

8. USE:

Residential

- One Family
- Two Family
- Multi-Family
- _____ no. of units
- Hotel, Motel
- Other

***Commercial**

- Assembly
- Office, Bank, _____ no. of units
- Elevators
- Educational
- Factory/Industrial
- High Hazard
- Mercantile, Stores _____ no. of units
- Institutional:
- Hospital
- Convalescent
- Day Nurseries
- Temporary _____
- OTHER _____

*(Site & Mechanical Plans to accompany application)

9. Indicate on the following list the building related mechanical items to be installed:

Air Conditioning	A	Fire Place Insert	I	Mech. Refrigeration	Q	Warm Air Furnaces	Y
Boilers	B	Fire Standpipe Unit	J	Package Unit	R	Wood Stoves	Z
Conversion Burners	C	Floor Furnace	K	Re-inspection	S	MECH -Water Heater	AA
Dryers	D	Fuel Piping	L	Restaurant Equip.	T	Vents	AB
Duct Work	E	Fuel Storage Tanks	M	Room Heaters	U	Gas Piping	AC
Fans and Blowers	F	Heat Pumps	N	Solar Water Heater	V		
Fire Alarm System	G	Incinerators	O	Unit Heater	W		
Fire Place	H	Kitchen Hood Vent	P	Wall Heaters	X		

10. Total number of Mechanical items to be installed: _____

11. Nature of work: _____

12. Valuation: \$ _____ 15. Total Fee: \$ _____

All permits necessary for the completion of the work indicated will be obtained and paid for before any work is started. Failure to comply with applicable codes will result in the penalties set forth in Chapter 6, Portsmouth City Code. Any falsification, misrepresentation or misleading information **VOIDS** this application.

13. APPLICANT

Master Mechanical

SIGNATURE _____ DATE: _____

OFFICE USE ONLY

Case No. _____ Application No. _____

Job No. _____