

APPLICATION FOR COMMERCIAL MECHANICAL PERMIT

City of Elkins, Arkansas
Inspection Division
348-B N. Center
Phone: 479-643-3696 Fax: 479-643-3368

BUILDING PERMIT # _____ DATE _____

OWNER/BUILDER _____

SITE ADDRESS _____

H/A CONTRACTOR _____ CONTACT NAME _____

CONTRACTOR MAILING ADDRESS _____

CONTRACTOR PHONE NUMBER _____ FAX _____

Type of Building:

() Commercial () Industrial () Educational () Other _____

Type of Construction:

New _____ Addition _____ Alteration _____ Repair _____

FIRST UNIT..... @ \$105.00.....
WATER HEATER VENTS.... @ \$10.50 per vent.....
TEMPORARY HEAT..... @ \$26.25
ADDITIONAL UNITS..... @ \$52.50 ea.....

MINIMUM PERMIT FEE \$105.00
RE-INSPECTION FEE \$52.50

TOTAL FEE: \$ _____

IT IS A VIOLATION OF ELKINS MUNICIPAL CODE SECTION 11.25.01 THRU 06 TO CONNECT THE CONDENSATION DRAIN FROM AN HVAC, AIR CONDITIONING, OR REFRIGERATION UNIT TO THE ELKINS SANITARY SEWER SYSTEM.

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.

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.

EST. VALUATION: _____ AR. CONT. LIC. # _____ EXP. DATE: _____

SIGNED: _____ MASTER LIC. #: _____ EXP. DATE: _____

MASTER HVACR

Attach a legible copy of current Arkansas HVACR License to this application