



COMMERCIAL HVAC PERMIT APPLICATION

CITY OF DEFIANCE
BUILDING INSPECTION
631 PERRY STREET SUITE 101
DEFIANCE, OHIO 43512
419-784-2195

RECEIPT NO. _____ CHECK NO. _____ PERMIT NO. _____

JOB ADDRESS: _____

ESTIMATED COST OF PROJECT _____

NEW CONSTRUCTION () ADDITION () ALTERATION ()

TYPE OF EQUIPMENT	NUMBER	FEE
NEW BUILDING – BASE	X \$ 200.00	
Plus Fee per 100 sq ft	X \$ 4.50	
ADDITIONS – BASE	X \$ 200.00	
Plus Fee per 100 sq ft	X \$ 4.50	
MAKE-UP AIR UNIT – REPLACEMENT	X \$ 65.00	
AIR HANDLING UNIT – REPLACEMENT	X \$ 65.00	
AIR CONDITIONER - REPLACEMENT	X \$ 65.00	
FURNACE – REPLACEMENT	X \$ 65.00	
BOILER	X \$ 65.00	
WATER HEATER	X \$ 65.00	
GAS LINE	X \$ 30.00	
OTHER GAS RELATED ALTERATION	X \$ 30.00	
RE-INSPECTION FEE	X \$ 30.00	

SUBTOTAL	
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*COMMERCIAL ADD 3% SURCHARGE FOR STATE OF OHIO _____

TOTAL FEE _____

OWNER _____ CONTRACTOR _____

ADDRESS _____ ADDRESS _____

CSZ _____ CSZ _____

PHONE NO. _____ PHONE NO. _____

THIS APPLICATION IS SUBMITTED FOR A PERMIT TO ERECT, ADD TO, ALTER OR REPAIR A STRUCTURE AS DESCRIBED IN THIS APPLICATION AND ANY DRAWINGS, WHICH ACCOMPANY IT. THE ACCEPTANCE OF THE PERMIT SHALL BE CONSIDERED AN AGREEMENT ON THE PART OF THE APPLICANT OR HIS AGENTS TO COMPLY WITH THE BUILDING AND ZONING CODES OF THE CITY OF DEFIANCE, OR OTHER ORDERS, REQUIREMENTS OR SPECIFICATIONS STATED IN THE PERMIT.

APPLICANT'S SIGNATURE _____ PRINT NAME _____ DATE _____

INSPECTOR _____ DATE _____