



**CITY of  
NORTH  
OLMSTED**

**APPLICATION FOR HVAC PERMIT**

**INSTRUCTIONS: An Application for Plan Approval and General Building Permit must be submitted with this form if one has not been submitted for the project.**

**PROJECT/BUILDING LOCATION**

Street Address:

Residential

Commercial

Application Date:

Anticipated Completion Date:

**OWNER INFORMATION**

Name of Owner:

Attention:

Street Address:

City:

State:

Zip Code:

Phone:

Email:

**CONTRACTOR INFORMATION**

Name of Contractor:

Attention:

Street Address:

City:

State:

Zip Code:

Phone:

Email:

If a corporation, name of individual authorized to act on behalf of corporation:

Title:

Signature of individual listed above.

I certify that all information contained in this application is true, accurate, and complete to the best of my knowledge. All official correspondence in connection with this application should be sent to my attention at the address shown above.

X \_\_\_\_\_

**Permit holder is responsible for arranging inspections. Provide the correct address and permit number when calling for inspections. 24 hour notice requested for inspection.**

**COMMERCIAL PROJECTS - Indicate number to be installed (see Sections 1321.01 and 1321.02 for fee schedule)**

Combination Rooftop Units BTU \_\_\_\_ Tons \_\_\_\_  
 Comb. Htg. & Cooling Systems BTU \_\_\_\_ Tons \_\_\_\_  
 Heating System BTU \_\_\_\_ CFM \_\_\_\_  
 Cooling System BTU \_\_\_\_ CFM \_\_\_\_  
 Unit-Space-Duct Heaters BTU \_\_\_\_  
 Baseboard Heating BTU \_\_\_\_  
 Gas Infrared Units BTU \_\_\_\_  
 Kitchen Exhaust Systems CFM \_\_\_\_

Exhaust Fans CFM \_\_\_\_  
 Boilers (Hot Water Heat) Hydronics Certification No. \_\_\_\_  
 Chiller, VAV, VVT, Terminal or Misc. Units  
 Duct Work Only  
 Coolers & Refrigeration – Food/Beverage  
 Freestanding Fireplaces  
 Make Up Air Units

**RESIDENTIAL PROJECTS – Indicate number to be installed (see Section 1321.02 for fee schedule)**

Heating System  
 Cooling System  
 Combination Heating & Cooling Systems

Duct Work Only  
 Exhaust Fans  
 Freestanding Fireplaces

**OFFICIAL USE ONLY**

Application/Permit Number \_\_\_\_\_ Issued Date: \_\_\_\_\_

Permit Cost \$ \_\_\_\_\_ Plan Review Cost \$ \_\_\_\_\_