

# The City of St. Augustine Beach Application for Mechanical (HVAC) Permit

The undersigned hereby applies for a permit for Mechanical (HVAC) work in accordance with the Mechanical Code of the

Owner/Occupant: \_\_\_\_\_

Job Address: \_\_\_\_\_

Legal Description: Lot \_\_\_\_ Block: \_\_\_\_ S/D: \_\_\_\_\_

Use of Building: SFR \_\_\_\_ 2 Family \_\_\_\_ Multi \_\_\_\_ Comm. \_\_\_\_

Type of Fuel Gas \_\_\_\_ LPG \_\_\_\_ Electric \_\_\_\_ Other \_\_\_\_

Contractor: \_\_\_\_\_ Bldg. Permit \_\_\_\_\_

TYPE OF EQUIPMENT	NO.	HP	BTU	KW
Air Conditioning Units				
Refrigeration				
Gas Fired Units				
Boilers				
Forced Air Systems				
Floor Furnaces				
Evaporate Cooler				
Air Handling Units				

Change Out

REPLACEMENT OF OUTSIDE UNITS MUST MEET THE FLOOD ELEVATION REQUIREMENT. IF THE UNIT YOU ARE REPLACING IS IN THE "AE" FLOOD ZONE, IT IS YOUR RESPONSIBILITY TO PLACE THE UNIT AT OR ABOVE THE FLOOD ELEVATION REQUIRED OR AT THE LEAST ABOVE THE EXISTING FINISHED FLOOR ELEVATION.

\_\_\_\_\_  
I HAVE READ AND UNDERSTAND THE ABOVE

<b>TOTAL COST OF INSTALLATION</b>	<b>\$</b>		<b>\$</b>	-
			PERMIT FEE	<b>\$</b> 10.00
			<b>TOTAL FEE</b>	<b>\$</b> -

\_\_\_\_\_  
Mechanical Contractor

\_\_\_\_\_  
Signature

License #: \_\_\_\_\_ Permit #: \_\_\_\_\_ Date: \_\_\_\_\_