			PERMIT NO:							
MECHANICAL PERMIT APPLICATION Douglas County Zoning & Codes Department 3755 E 25 th St, Lawrence, KS 66046 Phone: 785-331-1343 Fax: 785-842-1201 Website: https://www.douglas-county.com/depts/zc/zc_home.aspx [VOID UNLESS WORK STARTED WITHIN 180 DAYS]										
OWNERS Name		PROJECT Address								
Mailing Address			City		State	Zip				
City	State	Zip	Section	Township	Range	Acres				
Phone:	Mobile:	•	Subdivision		Lo	t Block				
Email:										
GENERAL Contractor	Description of Work (Briefly describe the work to be performed)									
Address	ddress				Residential Commercial					
City	State	Zip								
Phone:	Mobile:									
Email:										
MECHANICAL Contractor*										
Address										
City		Zip	TOTAL Estin	mated Cost C	of Project	\$				
Phone:	Mobile:	•								
	•									
ELECTRICAL Contractor* (If Applicable)			SIGNATURE/AGENT:							
Address										
City	State	Zip								
Phone:	Mobile:									

Check Items Below Applicable to Job:					✓							 ✓ 		
New Installation										Repair				
Alteration										Replacement				
Gas Piping									Other					
щ			Geot	escription Type hermal, Forced Air, Pump, Boiler/Radiant	Fuel Type (Select from below) Electric, Natural Gas, Propane, Fuel Oil, Solid Fuel, Solar			oane, Iar	Size Energy Effic BTU/Wattage/ Rating Tonage e.g.: AFUE, S			Rating		
EM TO E	Furnace Heater) -												
IT/SYST	Boiler													
TYPE OF EQUIPMENT/SYSTEM TO BE PROVIDED AND/OR INSTALLED	Cooling Equipm													
E OF EC	Water H	leater												
4 T	Gas Fire	eplace												
	Solid Fu Applian													
FOR OFFICE USE ONLY														
SITUS ADDRESS: City									KS	ZIP				
Plate: PIN									Zoning Dist	rict				
Frontage Road Classification				Setbac	cks	Fro	ont	Side		Rear				
Floodplain Yes No D Flood elevation (if applicable)						Finish floor elevation (if applicable)								