



Building and Zoning Inspection Division

Town of Orange Park

Application for Mechanical Permit



DATE: _____ PERMIT # _____

IMPORTANT - Applicant to complete all items in Sections I, II, III, and IV

Section I. Location of Building

Street Address _____
Lot No. _____ Sub-division _____
(Attach legal description)

II. Type of Proposed Mechanical Work - All Applicants Complete Parts A - D

A. Use of Building

Residential

- 1. One Family
- 2. Two or more family -
Enter number of rooms _____
- 3. Transient, hotel, motel
rooming house -
Enter number of units _____
- 4. Other residential _____

- 11. Utility
- 12. School, Library
Other Educational _____
- 13. Store, Mercantile
Other _____
- 14. Other Specify

Non-Residential

- 5. Amusement, Recreational
- 6. Church, Other Religious
- 7. Industrial
- 8. Garage, Service Station
- 9. Hospital, Institutional
- 10. Office, Bank, Professional

B. Ownership

- 15. Private (individual, corporation,
nonprofit institution, etc.)
- 16. Public (Federal, State or Local Government)

C. Nature of Work

- 17. New Building
- 18. Existing Building
- 19. Replacement of existing system
- 20. New installation (No system previously Installed)
- 21. Extension or add-on to existing system
- 22. Other - Specify

E. Type of Building

- 36. Number of Stories _____
- 37. Wood frame
- 38. Masonry and Wood
- 39. Reinforced Concrete
- 40. Structural Steel
- 41. Other _____

D. Mechanical Equipment to be Installed

(Provide complete list of components on back of this form)

- 23. Furnace Space Recessed Floor
- 24. Air Conditioning Room Central
- 25. Duct System: Material _____ Thickness _____
Maximum Capacity _____ c.f.m.
- 26. Refrigeration
- 27. Cooling tower: Capacity _____ g.p.m.
- 28. Fire sprinklers: Number of heads _____
- 29. Elevator Manlift Escalator _____ (number)
- 30. Gasoline Pumps _____ (number)
- 31. Tanks _____ (number)
- 32. LPG containers _____ (number)
- 33. Unfired pressure vessel
- 34. Boilers
- 35. Other - specify _____

THIS SPACE FOR OFFICE USE ONLY (Received)

Remarks _____

Permit Approved by _____ Date _____

Permit Fee \$ _____

III. GENERAL INFORMATION

A. Type of heating fuel:

- 42. Electric
- 23. Gas LP Natural Central Utility
- 44. Oil
- 45. Other - Specify _____

B. IS OTHER CONSTRUCTION BEING DONE ON THIS
BUILDING OR SITE? _____

IF YES, GIVE NUMBER OF CONSTRUCTION
PERMIT _____

IV. IDENTIFICATION - To be completed by all applicants

In consideration of permit given for doing the work as described in the above statement, we hereby agree to perform said work in accordance with the attached plans and specifications which are a part hereof and in accordance with the Town of Orange Park Ordinances and standards of good practice listed therein.

Name of Mechanical Contractor (Print)		Signature of Master	
Mechanical Contractor's Address		Master's State or County License #	
Mechanical Contractor's Phone		Property Owner Name	
		Property Owner Phone	

AIR CONDITIONING AND REFRIGERATION EQUIPMENT						
Number of Units	Description	Model Number	Manufacturer	Capacity (Tons)	Approving Agency	
FURNACE AND HEATING EQUIPMENT						
Number of Units	Description	Model Number	Manufacturer	Capacity (BTU)	Approving Agency	
TANKS						
How Many	Nominal Capacity and Dimensions	Type Liquid Contained	Name of Manufacturer	Serial No.	Approving Agency	
LIQUEFIED PETROLEUM GAS CONTAINERS						
How Many	Nominal Water Capacity	Type Gas Contained	Name of Manufacturer	Serial No.	Approving Agency	
UNFIRED PRESSURE VESSELS (Submit copy of Manufacturer's Inspection Certificate)						
How Many	Nominal Water Capacity	Type Gas Contained	Name of Manufacturer	Serial No.	Approving Agency	
Boilers (Submit Copy of Manufacturer's Inspection Certificate)						
How Many	Rated Boiler Horse Power	Heating Surface	Operating Pressurer	Name of Manufacturer	Serial No.	Approving Agency
EQUIPMENT NOT SHOWN ELSEWHERE:						