

# HVAC Permit Application

ALL FIELDS WITH \* MUST BE COMPLETED TO PROCESS APPLICATION

**\*Property Owner:** Name \_\_\_\_\_ Ph \_\_\_\_\_ Fax \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Contractor:**

Job Name: \* \_\_\_\_\_ Job Address: \* \_\_\_\_\_ Township: \_\_\_\_\_

Heating Contractor: \* \_\_\_\_\_ Ph. \* \_\_\_\_\_ Mahoning County License or registration# \* \_\_\_\_\_

**Please provide the following information if applicable**

Building Contractor: \_\_\_\_\_ Ph. \_\_\_\_\_ Building Permit # \_\_\_\_\_ Lot # \_\_\_\_\_

**\*Project Type:**  Commercial  Residential: New \_\_\_ Replacement \_\_\_

**System Type:** Forced Air \_\_\_ Boiler \_\_\_ Baseboard \_\_\_ Radiant \_\_\_ Condenser \_\_\_ Other \_\_\_\_\_

**Fuel Type:** Gas \_\_\_ Oil \_\_\_ Geo/Heat Pump \_\_\_ Electric \_\_\_ Solid \_\_\_ Other \_\_\_\_\_

**Efficiency:** 90% + \_\_\_ 80% \_\_\_ other \_\_\_ **Water Heater:** Gas \_\_\_ Electric \_\_\_

**Fireplace Type:** Masonry \_\_\_ Factory Built \_\_\_ Decorative Gas \_\_\_ **Installer:** \_\_\_\_\_

**\*Description of equipments to be installed:**

See attached contract and/ or plans

Note: for work beyond a basic replacement i.e., adding of additional equipments and or modifications to existing systems, additional plan submittals and fees may be required in accordance with section 106 of the Ohio Building Code and Building Department fee schedules.

**Fee Schedule:** (Delinquent projects subject to administrative fee equal to double the permit fee in addition to the permit fee)

**\*Residential:** HVAC Systems, Fireplaces and Woodstoves: \$50.00 first unit @ \_\_\_\_\_ = Fee: \_\_\_\_\_  
Replacement or each additional unit: \$25.00 per system @ \_\_\_\_\_ = Fee: \_\_\_\_\_

**\*Commercial:** \$140.00 if under \$10,000 CCIM – If greater than \$10,000 CCIM, please submit a Construction Cost Verification Form and present the complete application with an original contract to the office for calculation of your fee.

\*Both construction types are subject to either a 1% State assessment for Residential or 3% for Commercial

**Sample Fee Calculation:** 1-RES. HVAC @ \$50 + 1% State Assessment = \$50.50  
1-COM HVAC @ \$140 + 3% State Assessment = \$144.20

**Total fee due/ enclosed:** \_\_\_\_\_

UNDER PENALTY OF INTENTIONAL MISREPRESENTATION AND/OR PERJURY, I, \_\_\_\_\_ Print Name, declare that I have examined and/or made this application and it is true and correct to the best of my knowledge and belief. I agree to construct said improvement in compliance with all provisions of the applicable State of Ohio laws and/or building codes and Mahoning County Resolutions. I have been given authorization from the property owner to obtain this permit. I realize that the information that I have affirmed hereon forms a basis for the issuance of the permit herein applied for shall not be construed to permit any construction upon said premises or use thereof in violation of any applicable State of Ohio/ Federal laws and/ or Mahoning County resolutions or to excuse the owner or his or her successors in title from complying therewith.

I understand that by applying for this permit, the plans and specifications, and the representations therein contained, are made a part of this application. Furthermore, Mahoning County is requested to issue the Building Permit. I am consenting to the fees in accordance with the Building Department Fee Schedule; also, the inspection of this property and to the entry onto the property by inspectors of the authority having jurisdiction for the purpose of performing the necessary inspections for the duration of the permit. It is understood and agreed by this applicant that any error, misstatement or misrepresentation of material, fact or expression of material, or fact or any change in the accompanying plans, specifications or structure made subsequent to the issuance of a permit in accordance with this application, without the approval of the Chief Building Official of the County of Mahoning, shall constitute sufficient grounds for the revocation of such permit.

**ALL FEES SHALL BE PAID IN FULL AND ALL DOCUMENTS SIGNED BEFORE A BUILDING PERMIT WILL BE ISSUED**

\_\_\_\_\_  
\* Signature of Owner or Owner's Agent

\_\_\_\_\_  
Date

Mahoning County Building Department, 50 Westchester Dr. Room 201, Youngstown OH 44515  
Phone 330-270-2894 Fax 330-270-2898 www.mahoningcountyoh.gov