

**CITY OF MOBILE
URBAN DEVELOPMENT DEPARTMENT
APPLICATION FOR MECHANICAL FAX PERMIT**

Office Use Only:			
Date:	Permit No.:	Fee: \$	FM No.:

PLEASE PRINT

Address: _____ Apt. _____ Zip Code: _____

Owned by _____ Phone: _____

Commercial _____ **OR** Residential _____

Apartment _____ **OR** Duplex _____

New construction _____ **OR** Addition _____

Fire Job _____ **OR** Change out _____

FAX permit applications processed between 8:00 AM and 3:00 PM.

Description	Size/Number/Value	
Install complete system		
Install additional system		
Replace Air handlers/condensing unit/cooling tower		
Replace heater/coil, heater & coil, or condensing unit only		
Install boiler		Escrow Beginning Balance
Install commercial exhaust hoods		
Install restroom fans – commercial		+/-
Install restroom fans – residential		=
Relocating equipment		Escrow Ending Balance
Adding or changing ductwork		
Commercial Refrigeration Permit Issuance Fee		
Value of commercial refrigeration job		

Date: _____

Name of Mechanical Contractor

Contractor ID Number

Signature

Notes:

1. Always keep construction sites clear of debris in adherence with the Anti-Litter Ordinance.
2. Requests for inspection(s) on permits that are issued between 8 and 11 a.m. **may not** be scheduled before 1 p.m. on the day permit is issued.
3. Requests for inspection(s) on permits that are issued between 11 a.m. and 4 p.m. **will not** be scheduled on the day permit is issued.