

**CITY OF VALPARAISO**

**APPLICATION FOR MECHANICAL PERMIT SUPPLEMENT**

Mechanical Contractor Information

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ License No. : \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Equipment Type	Units	Size of Units
Air Conditioning Units		Tons
Refrigeration Units		H.P.
Forced Air Furnace		BTU
Boilers		H.P.
Chillers		Tons
Air Handling Units		CPM
Evaporative Coolers		BTU
Unit Heaters		BTU
Ventilation Fans		KFM
Cooling Tower		GPM
Pumps		H.P.
Air Cleaners		CFM
Duct System		CFM
Other (Specify)		

Equipment Type	No. of Units	Equipment Type	No. of Units	Equipment Type	No. of Units
Bathroom Fan		Walk In Cooler/Freezer		Cleaning Fluid Coolers	
Dryer Vent		Refrigeration Units		Solar Collector System	
Residential Range Hood		Ovens		Piping	
Residential Clothes Dryer		Incinerators		Medical Gas Equipment	
Gasoline Pumps		Electric Heating Equip		Medical Gas Outlet/Piping	
Gasoline Tanks		Panel Heating Equipment		Dental Vacuum System	
Hydraulic Lifts		Gas Heating Equipment		Pneumatic Tube System	
Air Compressors		Pressure Vessels/Tanks		Chilled Water Piping	
Car Wash Equipment		Commercial Washers		Condenser Water Piping	
Type I Hood		Commercial Dryers		Hot Water Piping	
Type II Hood		Steam Boilers		Steam Piping	
Kitchen Equipment		Steam Pressing Equipment		Refrigerant Piping	
Trash Masher		Extractors		Condensate Drain	
Other (Specify)		Pipe Insulation			

Additional Project Information:

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Signature of Applicant

Phone No.

Date

Approved By

Date