PERMIT #: _____ FEE: $_____

72 Hours Before You Dig
Call 1-800-282-7411
It's The Law

City of Donalsonville
BUILDING DEPARTMENT
Phone (229) 524-2118 Fax (229) 524-8360

MECHANICAL PERMIT

OWNER | JOB ADDRESS

Applicant to complete numbered spaces only.

JOB ADDRESS

1 ZIP | PROPERTY TAX ID#

OWNER PHONE
2

CONTRACTOR PHONE REGISTRATION NO.
3

MAIL ADDRESS
4

PROFESSIONAL DESIGNER PHONE REGISTRATION NO.
5

MAIL ADDRESS BRANCH
6

USE OF BUILDING
7

8 Class of work: ☐NEW ☐ADDITION ☐ALTERATION ☐REPAIR

9 Describe work:

10 VALUATION OF WORK: $

SPECIAL CONDITIONS: All work performed in accordance with 2006 IBC Standard Mechanical Code.

INDEMNIFY AGREEMENT

Upon meeting all requirements of the City of Donalsonville for the Issuance of this Permit and in consideration for the Issuance by the County/City of such permit, the applicant/owner hereby agrees to hold harmless and indemnify the County/City of and from any and all claims, demands, cost, suits, actions and causes of actions of every kind description made against the County/City.

NOTICE

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT, THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

Applicant or Contractor Signature Date

Building Department Representative Date

Type of Fuel: Oil ☐ Nat. Gas ☐ LPG. ☐

PERMIT FEES

No.	Type of Equipment		Fee
	Air. Cond. Units – H.P. Ea.		$
	Refrigeration Units – H.P. Ea.		
	Boilers – H.P. Ea.		
	Gas Fired A.C. Units – Tonnage Ea.		
	Forced Air Systems – B.T.U.	M Ea.	
	Gravity Systems – B.T.U.	M Ea.	
	Floor Furnaces – B.T.U.	M	
	Wall Heaters – B.T.U.	M	
	Unit Heaters – B.T.U	M	
	Evaporative Coolers		
	Clothes Dryers		
	Ventilation Fan		
	Range Hood		
	Air Handling Unit –	C.F.M	
	Incinerator		
	PERMIT FEE		$
	INSPECTION FEE		$
	APPLICATION FEE		$
	TOTAL FEE		$

WHEN PROPERLY VALIDATED (IN THIS SPACE) THIS IS YOUR PERMIT

PLAN CHECK VALIDATION CK. M.O. CASH PERMIT VALIDATION CK. M.O. CASH

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