



HVAC PERMIT

Application

132 North Elmwood Avenue
 Phone: 330-722-9030
 Fax: 330-722-9045
www.medinaoh.org
permits@medinaoh.org

Permit Number _____

Date of Application _____

GENERAL	Property Location _____ Scope of Work _____ _____
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CONTACT INFORMATION	Contractor/Applicant Contractor _____ Registration # _____ Address _____ City _____ State _____ Zip _____ Phone _____ Email _____ Property Owner Name _____ Address _____ City _____ State _____ Zip _____ Phone _____ Email _____
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PROJECT INFORMATION	Type of Work: New <input type="checkbox"/> Alteration <input type="checkbox"/> Addition <input type="checkbox"/> Replacement <input type="checkbox"/> Describe if other _____ Type of fuel: Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Solar <input type="checkbox"/> Describe if other _____ Type of equipment: Forced Air <input type="checkbox"/> Elect Baseboard <input type="checkbox"/> Fireplace <input type="checkbox"/> Furnace <input type="checkbox"/> Heat Pump <input type="checkbox"/> Air Handler <input type="checkbox"/> A/C <input type="checkbox"/> RTU <input type="checkbox"/> Boiler* / Hydronic / Steam: Panel <input type="checkbox"/> Other _____ <small>* An ASSE 1013, reduced pressure backflow device is required on all boilers. MCO Ch 919.13 (Ord. 134-00. Passed 7-10-00)</small> Equipment Manufacturer _____ Are plans being submitted? Yes <input type="checkbox"/> No <input type="checkbox"/> Does this project require carbon monoxide alarms? Yes <input type="checkbox"/> No <input type="checkbox"/> <small>(per Section 315 of the 2013 Residential Code of Ohio)</small>
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SIGNATURE & SUBMITTAL	<p><i>The owner or agent of the owner of this building and undersigned, do hereby covenant and agree to comply with all laws of the State of Ohio, Codified Ordinances of the City of Medina pertaining to the performance of work for which this permit is issued, and in accordance with the approved plans, specifications or manufacturer's instructions submitted herewith, and certify that the information and statements given on this application, drawings and specifications are to the best of their knowledge, true and correct. Undersigned accepts responsibility for requesting all required inspections in a timely manner.</i></p> Application By: _____ Date _____ <small style="margin-left: 100px;">Signature of owner, contractor, or authorized agent</small> Print name of Applicant: _____
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OFFICIAL USE	Fee \$ _____
	Signature _____ Date _____
	<i>Building Official</i>