

Community Development

BUILDING SAFETY DIVISION

115 E. Washington St., PO BOX 3157 Bloomington, IL 61702-3157 Phone: 309-434-2226 comdev@cityblm.org

HVAC Permit Application

(CIRCLE ONE)		COMMERCIAL	RESIDENTIAL	MOBILE HOME	
(CIRCLE ONE)		NEW CONTRUCTION	REMODEL	REPLACEMENT	
(CIRCLE ONE)		FURNACE	A/C	вотн	
Site Address:				Office Use Only Application Number: Permit Issued Permit Number: Permit Ready to Issue: Permit Fee: Contacted: Phone Email	
Unit #:					
Scope of Work:					
Cost of Work:				Application Date:	
Is this part of a larger project?				Anticipated Start:	
If yes, what project?				Anticipated End Date:	
Applicant (check one)		Name	Address	Email	Phone
	Owner of Property				
	HVAC Contractor				

Required Items to be Submitted by Applicant					
One Unit or Multiple Units					
Are you increasing the number of units? Yes No					
Size of Equipment					
Description					
Venting of Equipment					
Location					
Description:					

Contractor/Applicant Signature:



- PLEASE ATTACH PLANS / SKETCHES TO THIS APPLICATION.
- PERMITS MUST BE OBTAINED BEFORE WORK BEGINS.
- ACCEPTANCE OF PAYMENT DOES NOT CONSTITUTE A PERMIT.
- SUBMISSION OF THIS FORM DOES NOT GUARANTEE OR GRANT APPROVAL TO START WORK.
- APPLICATION VOID IF WORK IS NOT STARTED WITHIN 6-MONTHS AFTER PERMIT ISSUANCE.