

APPLICATION FOR MECHANICAL PERMIT
YANCEY COUNTY BUILDING INSPECTIONS

SITE ADDRESS _____
SUBDIVISION/LOT # _____
DIRECTIONS _____

OWNER _____ ADDRESS _____
CITY _____ STATE _____ ZIP _____ PHONE # _____
PIN # _____ THIS IS REQUIRED
TYPE OF BUILDING NEW ___ EXISTING ___ ADDITION ___ REPLACEMENT ___
TYPE OF WORK NEW ___ REPAIR ___ OTHER _____
TYPE OF USE Single Family ___ Townhouse ___ DUPLEX ___ Mobile Home ___ Multifamily ___ OTHER ___
COMMERCIAL (Office, Business, ETC) _____

CONTRACTOR _____ as name appears on license. LICENSE NUMBER _____
_____ H1 _____ H2 _____ FP _____
FS _____ REFRIGERATION _____
ADDRESS _____
CELL PHONE _____ OTHER PHONE _____ EMAIL _____

CONTRACTOR COST \$ _____
TYPE OF FUEL ELECTRIC ___ LP GAS ___ NATURAL GAS ___ OIL ___ OTHER ___
UTILITY COMPANY PSNC _____ PROPANE GAS CO _____ OIL _____ OTHER _____

DISCRPTION	QTY	SIZE
BOILER	_____	_____
FURNACE	_____	_____
A/C UNIT	_____	_____
CHILLER	_____	_____
HEAT PUMP	_____	_____
GAS LOGS (VENTED)	_____	_____
GAS LOGS (unvented)	_____	_____
WATER HEATER	_____	_____
MINISPLIT UNIT	_____	_____
OTHER: Description of work	_____	

CHECK IF INSTALLING GAS PIPING: GAS PIPING _____ *CSST GAS PIPING _____
*Electrical permit requires CSST GAS PIPING

The undersigned hereby certifies that he/she is either the owner or the authorized agent of the owner and hereby makes application for permit and inspection of work described and agrees to comply with all applicable laws regulating the work.

CONTRACTOR'S SIGNATURE _____ DATE _____ PRINT APPLICANT'S NAME _____

PERMIT FEE \$75.00

YANCEY CO BUILDING INSPECTOR
202 MEDICAL CAMPUS DRIVE
BURNSVILLE NC 28714
828-682-7833