

HVAC PERMIT APPLICATION

EMAIL ADDRESS
accbuild@accgov.com

ATHENS-CLARKE COUNTY INSPECTION DEPARTMENT
PHONE: (706) 613-3520 FAX: (706) 613-3527

STREET ADDRESS
120 W. Dougherty Street
Athens, GA 30601

STREET ADDRESS: _____ SUBDIVISION: _____

BLDG/TENANT SPACE#: _____ TAX MAP: _____ BLOCK: _____ LOT: _____

ZONE _____ EXISTING BLDG? Y _____ N _____ PRESENT USE: _____

OWNER: _____ ADDRESS: _____

WORK PERFORMED ON: SINGLE FAMILY _____ DUPLEX _____ APTS _____ CONDO _____ COMMERCIAL _____
CLASS A HOME _____ MAKE ADDITIONS/ALTERATIONS TO: _____

INSPECTORS SHOULD BE CONTACTED AT 613-3520 WHEN JOB IS ROUGHED AND COMPLETED.

Commercial and Residential	No.	Fee
(a) Heating and / or Cooling		
Commercial and Residential \$2.00 per No. of supply and Return drops		

(b) Other	No.	Fee
1 Refrigeration \$2 per Ton		
2 Exhaust Fans \$2 Per drop over 1hp		
3 Grease/Vent Hood \$75 ea Hood		
4 Incinerator \$75 Per Unit		

(c) Repair or Replacement see above schedule

Remarks:

THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND THE PROPOSED WORK MEETS ALL CODES AND ORDINANCES OF ATHENS-CLARKE COUNTY.

CONTRACTOR _____
MAILING ADDRESS _____
CITY _____ STATE _____ ZIP _____
PHONE _____ DATE _____
BUSINESS LICENSE NO. _____
STATE LICENSE NO. _____

SHADED AREAS FOR OFFICE USE ONLY

Minimum Fee \$75.00 x No. of Units _____ = _____

FEE TOTALS FROM SECTIONS (a), (b), (c) ABOVE _____

TOTAL \$ _____

APPLICANT NAME _____
(PRINT)

APPLICANT SIGNATURE _____ DATE _____

APPLICATION DATE _____ PERMIT NO. _____ FEE _____
APPLICATION APPROVED _____ DENIED _____ DATE _____