

MECHANICAL PERMIT APPLICATION

MUNICIPALITY _____ NUMERICAL CODE _____ PERMIT NO. _____

APPLICATION DATE _____ CENSUS TRACT _____ FEE RECEIVE _____ BY _____

1. STREET LOCATION _____ No. of Stories _____

2. PLAT/MAP _____ 3. LOT/BLOCK _____ 4. FILE/PARCEL _____ 5. MATERIAL OF STRUCTURE IS _____

6. USE OF STRUCTURE: PREVIOUS _____ PROPOSED _____

7. OWNER _____ ADDRESS _____ TEL NO. _____

8. CONTRACTOR _____ ADDRESS _____ TEL NO. _____

9. ARCH. OR ENG _____ ADDRESS _____ TEL NO. _____

10. STAMPED PRINTS: _____ 11. ARCH. OR ENG. REG. NO. _____ 12. CONTRACTOR'S LIC NO. _____

13. RATING OF BOILER OR FURNACE _____ Drawings submitted _____

14 Check one _____ 15. Estimated Cost of Labor and Material _____

16. Floor location of equipment _____

17. CAPACITY of STORAGE TANK _____ EXISTING _____ NEW _____

18. DESCRIPTION OF WORK TO BE PERFORMED _____

19. Estimated Cost of labor and material

MUNICIPAL MECHANICAL PERMIT FEE:

CE/ADA FEE: _____ x .001 _____ =

ESTIMATED COST x .001

(1 & 2 FAMILY DWELLING LIMITED TO CE&ADA FEE OF \$50.00)

I hereby certify that I have the authority to make the foregoing application, that the application is correct, and that the owner of this building and the undersigned agree to conform to all applicable codes and ordinances of the municipality.

Tel. No _____ APPLICAN'S SIGNATURE _____

Installation for: Incinerators w/ or w/o Air Pollution Control, Settling Chambers, Scrubber, Afterburner.	Boiler Installations. 200,000 BTU or more, or for dwellings of 6 Units or More	Elevators, Dumbwaiters, Moving Stairs, and certain other Conveying Devices.
This Application to install or Renovate the above must also be reviewed by: R.I. DEPT. OF HEALTH DIVISION OF AIR POLLUTION CONTROL Davis Street Providence, R.I. 02903	This Application to install or Renovate the above must also be reviewed by: R.I. DEPT. OF LABOR DIVISION OF OCCUPATIONAL SAFETY, BOILER UNIT 220 Elmwood Avenue, Providence, R.I. 02907	This Application to install or Renovate the above must also be reviewed by: R.I. DEPT. OF LABOR DIVISION OF OCCUPATIONAL SAFETY, ELEVATOR UNIT 220 Elmwood Avenue, Providence, R.I. 02907

DO NOT WRITE BELOW THIS LINE MECHANICAL PERMIT

PERMIT GRANTED:

Date _____

By _____

Mechanical Inspector