



100 NW 1<sup>st</sup> Avenue Delray Beach FL 33444  
(561) 243-7200 Fax: (561) 243-7221

Website: mydelraybeach.com



**APPLICATION FOR MECHANICAL PERMIT**  
**(Refrigeration, Hoods, Suppression Systems & Spray Booths)**

|      |    |     |     |      |       |     |  |  |  |  |  |  |  |  |  |
|------|----|-----|-----|------|-------|-----|--|--|--|--|--|--|--|--|--|
|      |    |     |     |      |       |     |  |  |  |  |  |  |  |  |  |
| CITY | RG | TWP | SEC | SUBD | BLOCK | LOT |  |  |  |  |  |  |  |  |  |

**FOR OFFICE USE ONLY**

|                            |                          |             |
|----------------------------|--------------------------|-------------|
| BLDG. PERMIT NUMBER: _____ | PLAN CHECK FEE: \$ _____ | MCR # _____ |
| MECH. PERMIT NUMBER: _____ | PERMIT FEE: \$ _____     |             |
|                            | FIRE FEE: \$ _____       |             |

**PLEASE PRINT:**

JOB SITE ADDRESS \_\_\_\_\_

PROPERTY OWNER NAME \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_

PROPERTY OWNER ADDRESS \_\_\_\_\_

MECHANICAL CONT'R (COMPANY) NAME \_\_\_\_\_

MECHANICAL CONT'R (COMPANY) ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_) \_\_\_\_\_

**PROJECT COST (Labor and Material) \$ \_\_\_\_\_ NEW \_\_\_\_\_ or REPLACEMENT \_\_\_\_\_**

**REFRIGERATION**

Equipment Type: \_\_\_\_\_

C.U. Model No.: \_\_\_\_\_

H.P. or BTU/HR: \_\_\_\_\_

E.V.A.P. Model #: \_\_\_\_\_

Effic'y Rating: \_\_\_\_\_

**HOODS – EXHAUST- BOOTH – BLOWER (3 SETS OF PLANS RQR'D)**

Spray Booth: \_\_\_\_\_

Hoods : \_\_\_\_\_

**SUPPRESSION SYSTEMS (3 SETS OF PLANS RQR'D)**

Halon: \_\_\_\_\_ H2o \_\_\_\_\_

Dry Chem: \_\_\_\_\_ Wet Chem: \_\_\_\_\_

**Other Equipment:** \_\_\_\_\_

\_\_\_\_\_  
**SIGNATURE OF QUALIFIER    CONTR. REGISTRATION #    WORKERS COMP#    OR    EXEMPT (FID /FEIN) #**

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ who is personally known to me or who has produced (Type of ID) \_\_\_\_\_ as identification.

\_\_\_\_\_  
Signature of Notary Public

**(Seal)**

*NOTE:* Permit expires if work is not started within 180-days. At least 1-inspection every 180-days or permit expires. Plans must be on the job before inspection will be made. Final inspection is required on all permits.

**APPROVALS**

MECHANICAL: \_\_\_\_\_/DATE: \_\_\_\_\_    FIRE: \_\_\_\_\_/DATE: \_\_\_\_\_