

# CITY OF HAGERSTOWN

Planning and Code Administration Department  
 City Hall, 1 East Franklin Street, Hagerstown, MD 21740  
 FAX: 301-791-2650

Associated BP# \_\_\_\_\_

## ADDITION TO MECHANICAL PERMIT APPLICATION

Fax # \_\_\_\_\_

**Inspection Requests (301) 797-6313**  
**Permit Information (301) 790-4163**

|                     |                             |
|---------------------|-----------------------------|
| Job Location        | Lot No. Subdivision Name:   |
| Owner's Name        | HVAC License Holder's Name  |
| Owner's Address     | License Holder's Trade Name |
| City State Zip      | License Holder's Address    |
| Phone: Cell:        | City State Zip              |
| Description of Work | Phone: Cell:                |
|                     | State License #             |

**If door is locked or work is incomplete, a \$50.00 re-inspection fee will be charged per visit.**

| NO.             | ITEM  | EACH                          | FEE     |
|-----------------|---|-------------------------------|---------|
| <b>Required</b> | Application Fee – All Permits   |                               |         |
|                 | Residential   | \$ 50.00                      |         |
|                 | Commercial  | \$100.00                      |         |
|                 | Apartment   | \$100.00                      |         |
| <b>Required</b> | Technology Fee – All Permits  |                               | \$20.00 |
|                 | Commercial Exhaust Hood   | \$30.00                       |         |
|                 | Furnace - <input type="checkbox"/> Gas <input type="checkbox"/> New<br><input type="checkbox"/> Oil <input type="checkbox"/> Replacement<br><input type="checkbox"/> Electric   | \$20.00                       |         |
|                 | Boiler - <input type="checkbox"/> Hot Water <input type="checkbox"/> New<br><input type="checkbox"/> Steam <input type="checkbox"/> Replacement   | \$20.00                       |         |
|                 | Solid Fuel Burning Appliances   | \$20.00                       |         |
|                 | Heat Pump   | \$20.00                       |         |
|                 | A/C - <input type="checkbox"/> Residential <input type="checkbox"/> New<br><input type="checkbox"/> Commercial <input type="checkbox"/> Replacement   | \$10.00<br>\$20.00            |         |
|                 | HVAC Duct Modifications   | \$20.00                       |         |
|                 | Manufactured Fire Places –<br><input type="checkbox"/> Direct Vent<br><input type="checkbox"/> Ventless<br><input type="checkbox"/> With Chimney  | \$20.00                       |         |
|                 | Venting for : Type:<br>Hood <input type="checkbox"/> Com. <input type="checkbox"/> Res. <input type="checkbox"/><br>Dryer <input type="checkbox"/> Com. <input type="checkbox"/> Res. <input type="checkbox"/><br>Bath Fan <input type="checkbox"/> Com. <input type="checkbox"/> Res. <input type="checkbox"/> | \$10.00                       |         |
|                 | Heating Oil Storage Tanks<br><input type="checkbox"/> Residential<br><input type="checkbox"/> Commercial<br><input type="checkbox"/> Removal  | \$20.00<br>\$20.00<br>\$20.00 |         |
|                 | Chimney Liner   | \$20.00                       |         |
|                 | Others Not Listed   | \$10.00                       |         |
|                 | Investigation Fee   |                               |         |

Manual J Required for All New Installations

Plans Submitted  Yes  No

If in the opinion of the Mechanical Inspector, drawings and specifications are required for this application, I shall furnish such drawings and specifications.

It is the responsibility of the license holder to give 24 hour advance notice to the Planning and Code Administration Department when work is ready for testing and inspections. Failure to schedule inspections for any period of six months following the issuance of this permit will be cause for the permit to become void.

I acknowledge that I have read this application and affirm that the information supplied by myself is correct; and that the owner/tenant of the referenced property has authorized me to do the work described herein. I agree to comply with all City Ordinances and State Laws regulating hvac work.

I certify that I am properly registered and licensed as required by the State of Maryland.

\_\_\_\_\_  
Signature of License Holder/Applicant

\_\_\_\_\_  
Printed Name of License Holder/Applicant

\_\_\_\_\_  
Date

INVESTIGATION FEE: Any person who commences any work on a system before obtaining the necessary permits shall be subject to 100% of the usual fee in addition to the required fees.

TOTAL:

Munis Application No. \_\_\_\_\_

Planning & Code Administration  
Payment Information

Name as it appears on Credit Card \_\_\_\_\_

Credit Card Number (16 digits) \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date of Credit Card (MM/YY) \_\_\_\_/\_\_\_\_

Type of Credit Card:       Visa                       Mastercard                       Discover

Customer Validation Number: \_\_\_\_\_ (Last 3-digit-number on back of the card)

Billing Address: \_\_\_\_\_  
\_\_\_\_\_

Name of Contact Person \_\_\_\_\_ Telephone: \_\_\_\_\_

**All information is required or payment will not be processed**

A \$2.00 convenience fee will be charged on all faxed permit applications.

FAX APPLICATION AND PAYMENT INFORMATION FORM TO

301-791-2650