

MECHANICAL PERMIT APPLICATION

CITY OF BATESVILLE

Permit # _____

146 Public Square
Batesville, MS 38606

Date: _____

Cash _____

Check # _____

CC _____

Job Site Address _____

Subdivision _____ Lot _____ New _____ Addition _____

Residential _____ Commercial/Industrial _____ Other _____

Contractor _____ License # _____

Address _____ Phone _____

Email _____

Job Site Owner _____ Phone _____

Residential New			Base Fee		
A/C & Heating BTU Tons		x \$4.00 =	(+)	\$30.00	(=)
Residential Replacements			Flat Fee		
A/C & Heating Unit (or both)			\$35.00	(=)	
Records Management Fee					\$1.00
Total Fees Due					

The Following Work will be Based on \$\$\$\$ Valuation.

Valuation = \$40.00 for the 1st \$1000 Plus \$4.00 for each additional \$1000

Valuation = includes all equipment, materials, and labor, bid by the mechanical contractor to the general contractor, as embodied in the contract. ** A copy of the itemized contract from the general contractor must accompany the permit application based on valuation.

To compute \$\$ Valuation (found fractions of thousands UP to the next thousand).

****Example: Total Cost \$3200 Valuation \$4000 Thousands = 4**

	Valuation	Thousands								
A/C & Heating			-1	(=)		x4	(=)		(+)\$40	(=)
Others										
Boilers			-1	(=)		x4	(=)		(+)\$40	(=)
Refrigeration			-1	(=)		x4	(=)		(+)\$40	(=)
Vent Hoods			-1	(=)		x4	(=)		(+)\$40	(=)
Duct Work			-1	(=)		x4	(=)		(+)\$40	(=)
Misc.			-1	(=)		x4	(=)		(+)\$40	(=)
Records Management Fee									\$1.00	
Total Fees Due										
Due										

I, the undersigned, certify that the described work listed on this permit is true and correct. I acknowledge that any permit granted on the representation herein made may be revoked at any time without notice, on a breach of representation or violation of the adopted ICC Mechanical Code and all other codes and ordinances adopted by the City of Batesville. The Permit holder is responsible for obtaining the required inspections. First inspection fee is included in the permit fee. Re-inspection for a **failed inspection will require a \$100 fee** paid prior to re-inspection.

Contractor Signature _____ Date _____