## HEATING, AIR CONDITIONING, & REFRIGERATION

## **PERMIT APPLICATION**



## **CITY OF COLUMBIA DEVELOPMENT SERVICES**

Development Center • 1136 Washington Street, Columbia, SC 29201 • 803.545.3420 • Fax: 803.733.8699

DATE			SC LICENSE #					
COC Qualification Card #			Card Holder Name					
General Contractor Name		Master Permit #						
JOB LOCATION			OCCUPIED BY/ BUSINESS TYPE					
I, as a property owner or owner representative, confirm to the best of my knowledge that the above property is is not within a flood hazard area SIGNATURE:								
	NAME:							
CONTRACTOR INFORMATION	ADDRESS:							
	TEL:		FAX:			E-Mail		
Work will be done	Being Constructed			Remodeled			Existing	
Nature of Proposed Work: Install Remodel								
DESCRIPTION OF WORK								
		MANUFACTURER		Ν	MODEL NUMBER			KW or BTU
HEATING EQUIPMENT								
AIR CONDITIONING EQUIPMENT								
REFRIGERATION EQUIPMENT								
JOB VALUE Equipment + Installation	COMPLETION DATE							
It is understood and agreed by the undersigned that the approval of this application does not constitute a privilege to violate the Building Code, Zoning Ordinance or other Ordinances of the City of Columbia, and that any omission of or misrepresentation of fact with or without intention of the undersigned, or any alteration or change from this application without approval of the Building Official shall constitute sufficient grounds for the revocation of any permit issued which was based on the approval of this application.								
SIGNATURE								
FOR STAFF USE TMS#					zor	NING DISTR	ІСТ	
ZONING REVIEW	Approved	Denied		DATE				

<u>NOTE:</u> VENTILATION SYSTEMS for uses specified in the International Mechanical Code will require the submittal of engineered drawings for review prior to permitting.