

HVAC/MECHANICAL PERMIT APPLICATION

CITY OF RINCON
 Planning & Development Department
 302 S Columbia Avenue
 Rincon, GA 31326
 P: 912-826-5996 F: 912-826-2083
 www.cityofrincon.com



DATE RECEIVED: _____

PERMIT #: _____

Location Address: _____

Parcel #: _____

Type of Work:

New Addition Renovation Repair

Project Square Footage: _____

Total Valuation of Project: _____

Describe Work: _____

OWNER INFORMATION

Owner Name: _____

Phone: _____

Mailing Address: _____

Email: _____

City/State/Zip Code: _____

HVAC/MECHANICAL CONTRACTOR INFORMATION

Company Name: _____

Phone: _____

Contact Person: _____

Email: _____

Mailing Address: _____

City/State/Zip Code: _____

 Signature of Contractor

 Date

 Signature of Owner

 Date

Approved By: _____

Issued Date: _____

SUBMITTAL REQUIREMENTS

- Copy of HVAC/Mechanical trade license and business license
- Copy of building layout, if applicable

Note: Incomplete applications will not be processed.