CITY OF PINE LAKE 462 CLUBHOUSE DRIVE PINE LAKE GA 30072 404-292-4250

HVAC PERMIT APPLICATION ALL PERMITS MUST BE POSTED AT THE JOB ADDRESS

HVAC PERMIT #		INSPECTION LINE: 770-817-0696 All requests must be in 12:00 p.m. for a next day inspection		
DATE ISSUED		All requests	must be in 12:00 p.m. for a	a next day inspection
ISSUED BY		<u>REQUIREI</u>	D ATTACHMENTS:	
BLDG PERMIT #		□ STATE CA □ HOMEOW		□ DRIVERS LICENSE
PROJECT COST	\$	METHOD OF PAYM	ENT 🗆 Check# 🗆	Cash □ Credit Card
Check Applicable Type	<u>:</u>			
□ RESIDENTIAL (Single Fa (Includes Townhomes & Cond	3 7	TIAL (Multi-Family) rtments, Duplexes & Triplexes)	□ COMMERCIAL	
Check Applicable HVA	C Information:			
□ NEW BUILDING	□ ADDITION TO BUILDING	□ EXPANSION TO EXIST	ING SYSTEM	EMENT
□ FIRE DAMAGE	□ GAS LINE PRESSURE TEST (Maximum 10 lbs of pressure must be applied for test)			
JOB ADDRESS				
UNIT OR SUITE #	APT #	BLDG # FLC	OOR #	
CITY	STATE	ZIP	PARCEL #	
HVAC, GENERAL CONTRA	CTOR OR PERMIT AGENT		(PRINT NAME)	
ADDRESS		CITY	STATE	ZIP
EMAIL:				
MOBILE	TELE		FAX	
HVAC OR GENERAL CONT	PACTOD SICNATUDE		PERMIT AGENT SIGNA	
(MUST BE THE STAT		(AUTHO)	RIZED PERMIT AGENT FORM	
PROPERTY OWNER	(
ADDRESS		CITY	STATE	ZIP
EMAIL:	CELI		PHONE	
PROPERTY OWNER SIGNA (ONLY REQUIRED IF THE	ATURE WORK IS BEING PERFORMED BY	THE HOMEOWNER - HOMEO	WNERS AFFIDAVIT MUCH BI	E ATTACHED)
TENANT NAME (IF APPLIC	ANT NAME (IF APPLICABLE)		TELEPHONE #	
DESCRIPTION OF WORK T	O BE PERFORMED:			