



City of Dublin

BUILDING STANDARDS
5800 Shier-Rings Road, Dublin OH 43016
Phone 614.410.4670 Inspection Line 614.410.4680

APPLICATION FOR HVAC PERMIT

Application Date: _____ Bldg. App: _____ Hood App. No.: _____
 Job Address: _____ Parcel No.: _____
 Subdivision: _____ Lot No.: _____
 Owner Name: _____ Telephone: _____
 Contractor Name: _____ Telephone: _____
 Contractor Address: _____ Dublin Registration No.: _____

RESIDENTIAL

SF: _____

\$60.00 Minimum plus
\$30.00 for each additional 500 SF or fraction of 500 SF over 1,000 SF: _____

\$60.00 Replacement Units (Minimum Fee Only) **GAS** **ELECTRIC** _____

COMMERCIAL

New/Addition SF: _____ **Alteration SF:** _____

New/Addition \$70 Minimum plus
\$30.00 for each additional 1,000 SF or fraction of 1,000 SF over 1,000 SF: _____

Alteration \$70 Minimum plus
\$20.00 for each additional 1,000 SF or fraction of 1,000 SF over 1,000 SF: _____

Commercial Hood and Exhaust System \$95.00 per Hood (Fixed): _____

State of Ohio Commercial Surcharge @ 3%: _____

State of Ohio Residential Surcharge @ 1%: _____

TOTAL: _____

JOB DESCRIPTION: _____

This permit is granted on the express condition that the said work shall in all respects, conform to the ordinances of the City of Dublin and all the laws of the State regulating construction, installation, repair and alteration, and may be revoked at any time upon violation of any provisions of said laws.

Signature of licensed Contractor or Home Owner _____

Division of Building Standards _____