

City of Berkeley Lake

4040 S. Berkeley Lake Rd, Berkeley Lake, GA 30096 (770) 368-9484 Fax (770) 368-8810

berkeleylake.com inspector@berkeleylake.com

Application for Heating and Air Conditioning Permit

Permit for: (Check all that apply):		
☐ New Installation ☐ Replace	cement \square Repair \square R	Residential Commercial
Address of Job		
Owner Name		
Cell Phone	Email	
Contractor Name		Cell
State Card Number	Classification	Exp. Date
Occupational Tax Certificate # (Business License #) Provide a copy of your current state card	·	-
Company Name		Phone
	Fax	
City/State/Zip	Email	
Note: Minimum four (4) air chang use type B or C flues. All others u 2. # of Refrigeration units N Tons: Heat Loss: 3. # of Grease Hoods: *Permit must be accompanied by Fire inspection required. 4. Gas Pipe 5. # of Manufactured Fireplace Vents 6. Other (please specify)	Loss: (ges per hour for warm air systems rese type A flues. Make: CFM: CFM: CFM Square Feet CFM plans for any grease hood stamped to get the greater hand to get t	Model: cquired. All AGA approved equipment Model: Static Ext. Coils frequired by the Gwinnett County Fire Marshal. Model:
In filing this affidavit, I hereby certify that I am familiar with all the requirements and will abide be secured prior to the commencement of any teal lake.com to arrange for inspection. I certify that State and local code requirements. Fire safety multiple Lake Heating and Air Conditioning Permit. Applicant's Signature	by all the rules and regulations set fortar out work. Upon completion I will call all of the above statements are true ar	we and am either familiar with or will become the by the City of Berkeley Lake. A permit shall 1770.368.9484 or email inspector@berkeley. In that all work performed shall meet national rmit application shall serve as City of Berkeley. Date
Permit # HVAC	Check #	Account 100.32.2000

Date_

Permit

Issued by