

HVAC CONSTRUCTION PERMIT APPLICATION: COMMERCIAL BUILDINGS

It is expressly understood that the applicant for the permit agrees and states that this installation will be in strict compliance with the Uniform State Building Code and the Uniform State Residential Building Code.

Project Location: _____ Bldg #: _____

City: _____ Zip: _____

Owner's Name: _____ Telephone: (____) _____ - _____

Owner's Address: _____ City: _____ Zip: _____

Check Each Blank that applies: _____ New Construction / Additions _____ Existing Construction

Categories (Check all that apply): _____ Engineer Stamped Plans _____ Replacement _____ Correction and Testing

Other (Explain): _____

Value of Project: \$ _____ Cost of Permit: \$ _____

Value of HVAC Installations	Permit Fee	Value of HVAC Installations	Permit Fee	Value of HVAC Installations	Permit Fee	Value of HVAC Installations	Permit Fee
\$2,000 or less	\$125	\$100,001 to \$150,000	\$630	\$500,001 to \$600,000	\$1,725	\$1,100,001 to \$1,200,000	\$3,050
\$2,001 to \$10,000	\$180	\$150,001 to \$200,000	\$760	\$600,001 to \$700,000	\$1,900	\$1,200,001 to \$1,300,000	\$3,280
\$10,001 to \$25,000	\$270	\$200,001 to \$250,000	\$885	\$700,001 to \$800,000	\$2,125	\$1,300,001 to \$1,400,000	\$3,510
\$25,001 to \$50,000	\$330	\$250,001 to \$300,000	\$1,025	\$800,001 to \$900,000	\$2,355	\$1,400,001 to \$1,500,000	\$3,735
\$50,001 to \$75,000	\$390	\$300,001 to \$400,000	\$1,150	\$900,001 to \$1,000,000	\$2,590	\$1,500,001 to \$1,600,000	\$3,965
\$75,001 to \$100,000	\$500	\$400,001 to \$500,000	\$1,500	\$1,000,001 to \$1,100,000	\$2,820	Over \$1,600,000	See "***"

The fee for installations over \$1,600,000 is \$3,965 plus \$200 per \$100,000 or fraction thereof in excess of \$1,600,000.

The OPMC is issuing this HVAC construction permit upon your request in accordance with KRS 198B.6671 and 815 KAR 8:070. You, the undersigned, are fully aware that you are responsible for this installation in its entirety through completion. It is your responsibility to notify, request and obtain all required inspections. If for any reason you fail to complete this installation, it shall be your responsibility to notify OPMC immediately.

Master HVAC: _____ License #: _____

Company: _____

Complete Address: _____

Phone Number: (____) _____ - _____ Email: _____

Applicant Signature: _____ Date: _____