

**City of Jeffersontown**  
**Department of Inspections & Code Enforcement**  
 10416 Watterson Trail  
 Jeffersontown, KY 40299  
 Telephone: 502-267-8333 Fax: 502-267-0547

**H.V.A.C. PERMIT APPLICATION**

Permit #: \_\_\_\_\_ Building Permit #: \_\_\_\_\_

Permit Type:  HVAC  RANGE HOOD  SOLID FUEL  MECHANICAL REFRIGERATION

LOCATION: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Contractor: \_\_\_\_\_

KY License #: \_\_\_\_\_ Business License #: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

**DETAILED INFORMATION**

APPLICATION TYPE:  One & Two Family  Multi-Family  Commercial

EXTERIOR UNITS-LOCATION ON LOT:  Rear  Front  Side Distance to Property Line: \_\_\_\_\_ Ft

EQUIPMENT TYPE:  Gas  Oil  Electric  Water

Number of:		Number of:	
Combination Units:		Duct Openings:	
Heating Units::		Fin Tube Radiators:	
Boilers:		Fan Coil or Air Handling Units:	
Roof Top Units:		Infrared Heaters:	
Commercial Dryers:		Chillers:	
Air Conditioning Units:		Other Type:	

Number of Range Hoods: \_\_\_\_\_ Number with Suppression: \_\_\_\_\_

Number of Solid Fuel Burning Devices: \_\_\_\_\_

Number of Mechanical Refrigeration Units: \_\_\_\_\_ Number of Tons: \_\_\_\_\_

Estimated Cost:	\$ _____	Permit Fee:	\$ _____
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**REMARKS:**

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Supervisor's Signature: _____	Date: _____
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**PLEASE INCLUDE A SELF-ADDRESSED STAMPED ENVELOPE WHEN MAILING THIS APPLICATION**