



Erlanger Building/Zoning Department  
 505 Commonwealth Avenue  
 Erlanger, Kentucky 41018  
 Phone 859-727-7992  
 Fax 859-727-7944  
 Website erlangerky.gov

## HVAC CONSTRUCTION PERMIT APPLICATION: MULTI-FAMILY DWELLINGS

PROJECT ADDRESS \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_ SECTION: \_\_\_\_\_ LOT: \_\_\_\_\_

Identification	Name	Address	City/State/Zip Code	Phone
Owner				
Permit Applicant				
Applicant Email and Fax				
HVAC-R Contractor KY Master License #:				

**TYPE OF IMPROVEMENT AND USE:**

\_\_\_ New Construction      Number of Units \_\_\_\_\_      \_\_\_ Existing Unit      Number of Units \_\_\_\_\_

**DESCRIBE PROPOSED PROJECT:**

\_\_\_\_\_

**TYPE OF HEAT:**    \_\_\_ Gas            \_\_\_ Electric            \_\_\_ Oil            \_\_\_ Geothermal            \_\_\_ Other \_\_\_\_\_

**CODE USED:** \_\_\_ 2018 Kentucky Building Code    **OR**    \_\_\_ 2018 Kentucky Residential Code

**PERMIT FEE**

First system - \$105.00 PLUS ( \_\_\_ # of additional systems X \$50.00 = \_\_\_\_\_ ) equals \_\_\_\_\_ Total Permit Fee

The Erlanger Building/Zoning Department 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 the Department immediately.

It is expressly understood that the applicant for the permit agrees and states that this installation will be in strict compliance to the indicated Building Code.

**Master HVAC Signature** \_\_\_\_\_ **Mobile Phone #** \_\_\_\_\_

TO BE FILLED OUT BY CODE OFFICIAL		
<b>PLAN REVIEW</b>		
<b>DATE:</b> APPROVED _____	APPROVED WITH CONDITIONS _____	DENIED _____
<b>BUILDING OFFICIAL</b> _____		
DATE ISSUED _____	PERMIT #: _____	FEE \$ _____
PAYMENT DATE _____	TYPE _____	