

# MECHANICAL PERMIT APPLICATION



## PROJECT INFORMATION

Property Address: \_\_\_\_\_ Property Owner: \_\_\_\_\_  
 Owner Phone: \_\_\_\_\_ Owner Email: \_\_\_\_\_

## MECHANICAL CONTRACTOR INFORMATION (MUST BE REGISTERED WITH THE TOWN)

Are you the primary contractor or a subcontractor for this permit? ☐ Primary Contractor ☐ Subcontractor  
 Contact Name: \_\_\_\_\_ Business Name: \_\_\_\_\_  
 Business Address: \_\_\_\_\_  
 Business Phone: \_\_\_\_\_ Business Email: \_\_\_\_\_  
 NC License #: \_\_\_\_\_ Classification: \_\_\_\_\_ Expiration: \_\_\_\_\_

## SCOPE OF WORK (CHECK ALL THAT APPLY, LIST SIZE AND # OF UNITS BESIDE)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> New construction | <input type="checkbox"/> Furnace (gas) _____      | <input type="checkbox"/> New ductwork          |
| <input type="checkbox"/> Heat pump _____  | <input type="checkbox"/> Furnace (electric) _____ | <input type="checkbox"/> Commercial            |
| <input type="checkbox"/> A/C Unit _____   | <input type="checkbox"/> Mini-Split _____         | <input type="checkbox"/> Other (explain below) |

## DESCRIPTION OF WORK (INCLUDE LOCATIONS OF APPLIANCES, ATTACH ADDITIONAL SHEET IF NECESSARY)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Project Cost (Labor + Materials): \_\_\_\_\_ Gate/Door/Lockbox Code: \_\_\_\_\_  
 Other Trade Contractors (if applicable): \_\_\_\_\_

## MECHANICAL CONTRACTOR STATEMENT

*I, the undersigned, have read and understand the General Statutes pertaining to Mechanical Contracting in North Carolina. I hereby affirm or swear I am licensed and qualified to assume all responsibility and liability of a Mechanical Contractor upon this project. If I resign or am no longer affiliated with this said project, I will notify the Department of Planning and Inspections immediately by phone or in person, and in writing within three (3) working days. I will notify the Department with any major deviation from the scope of this permit application. Additionally, I attest that I have registered with the Town of Beech Mountain as a service provider and have no outstanding permit fees or fines. I understand that work started before obtaining proper permits will result in double permit fees.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN COMPLETED APPLICATIONS TO TOWN HALL IN PERSON OR BY EMAIL TO [permits@townofbeechmountain.com](mailto:permits@townofbeechmountain.com)**

DATE RECEIVED	PERMIT NUMBER	CONTRACTOR REGISTRATION	FEE AMOUNT	DATE PAID	DATE ISSUED	APPROVAL INITIAL
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