

**Mahanoy City Borough**  
**Uniform Construction Code HVAC and Fuel Tank Permit Application**

Location of proposed work or improvement:

Street Address: \_\_\_\_\_

Tax Parcel #: \_\_\_\_\_ Lot #: \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Principal Contractor: \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

Designer: \_\_\_\_\_ Phone #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Type of work or improvement: (Check one)

New Building: \_\_\_\_\_ Addition: \_\_\_\_\_ Alteration: \_\_\_\_\_ Repair: \_\_\_\_\_ Demolition: \_\_\_\_\_

Describe the proposed work: \_\_\_\_\_

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

**Heating**

Type of Fuel: \_\_\_\_\_ MFG: \_\_\_\_\_

BTU:    Input: \_\_\_\_\_                      Output: \_\_\_\_\_

Installation Cost: \_\_\_\_\_

**Air Conditioning**

BTU: \_\_\_\_\_ MFG: \_\_\_\_\_

Installation Cost: \_\_\_\_\_

**Fuel Tank**

Fuel Type: \_\_\_\_\_ Capacity of Tank: \_\_\_\_\_

Installation Cost: \_\_\_\_\_

Will the new heater be vented to the existing chimney? YES ( ) NO ( )  
If not, how will the new heater be vented? \_\_\_\_\_  
\_\_\_\_\_

Has the existing chimney been inspected? YES ( ) NO ( )  
If so, by whom, and what are his/her qualifications?  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Was the chimney approved? YES ( ) NO ( )  
If not, what repairs were required? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What is the condition of the chimney? \_\_\_\_\_  
How many appliances will be vented into the chimney? \_\_\_\_\_  
Will the heater be in an enclosed or insulated space? \_\_\_\_\_  
How will adequate combustion air be provided? \_\_\_\_\_  
\_\_\_\_\_

Description of building use: (Check one)

<input type="checkbox"/> Residential	<input type="checkbox"/> Non-Residential
<input type="checkbox"/> One-Family Dwelling	Specific Use: _____
<input type="checkbox"/> Two-Family Dwelling	Use Group: _____
	Change in Use: <input type="checkbox"/> Yes <input type="checkbox"/> NO
	If "Yes" Indicate Former: _____

The applicant certifies that all information on this application is correct and the work will be completed in accordance with the "approved" construction documents and PA Act 45 (Uniform Construction Code) and any additional approved building code requirements adopted by the Municipality. Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provision of the codes or ordinances of the Municipality or any other governing body. The applicant certifies that he/she understands all the applicable codes, ordinances and regulations.

Applicants for a permit shall be made by the property owner or agent or by the Registered Design Professional employed in connection with the proposed work.

I certify that the Code Administrator or the Code Administrator's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

\_\_\_\_\_  
*Signature of Owner or Agent*

\_\_\_\_\_  
*Print Name of Owner or Agent*

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

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

Permit Fee: \_\_\_\_\_