

Date Applied:

Searcy Inspection Department

300 West Arch Ave. Searcy, AR 72143-5202 501-279-1085 Fax 501-279-1084

Permit Number: _____

HVAC/R PERMIT APPLICATION

Project Address:		Cost of Construction:			
Owner Name:		Phone:			
Contractor:	Phone (Business or Cell):				
Address:	Cit	y:	State:	Zip:	
Arkansas HVAC/R Lic. Number:	Class:	Class: Expir			
Arkansas State Contractors Lic. Number: _		Ехрі	ration Date:		
Email:	Property U	Property Use: (Circle One) Re		dential Commercial	
Type Work: (Circle One) New Cons	truction Add-on/R	emodel Chan	ge Out		
Residential: New/Remodel - \$35.0	00 + (\$1	5.00 per unit x	# of units)	=	Total
Commercial: New/Remodel - \$50.	00 + (\$	15.00 per unit x	# of units)	=	Total
Refrigeration - \$50.0)0 + (\$	15.00 per unit x	# of units)	=	Total
Commercial Vent – a –Hood \$50.0	0 + (\$	515.00 per unit x	# of units)	=	Total
HVAC/R Change Out	9	\$23.00 per unit x	# of units	=	Total
Duct Work Addition / Replacement \$35.0)				Total
Permit Adjustment @ \$2.50 per \$1000.00 co	st of job				Total
If work begins before permit is issued, the P fine of \$100.00 will be issued per: City Ord	Extra & Recall Inspections are \$35.00 for each trip to the job site.				
****PERMIT ADJUSTMENT NOTICE**** IF JOB COST HAS NOT BEEN COVERED UNDER A BUILDING PERMIT THE PERMIT WILL BE ADJUSTED TO INCLUDE THE COST OF THE JOB ② \$2.50 PER \$1000.00 COST OF THE JOB. (PER CITY ORDINANCE 2005-19) ****Notice**** THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED. ****Notice**** I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS DOCUMENT AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLETED WITH, WHETHER SPECIFIED HEREIN OR NOT. GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATION CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.					
Signature of Contractor or Authoriz	ed Agent:	Dat	e: Monthly Rep	 oort E	Billed