

# CITY OF ELYRIA RESIDENTIAL MECHANICAL APPLICATION

<b>Job Location</b>	<b>Date Stamp</b>
Address _____	
Lot/Unit/Suite No. _____ Subdivision _____	

**Owner Information**

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Mobile ( \_\_\_\_\_ ) \_\_\_\_\_ Email \_\_\_\_\_

**Contractor Information**

Name \_\_\_\_\_ DBA \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Mobile ( \_\_\_\_\_ ) \_\_\_\_\_ Email \_\_\_\_\_

**Mechanical Fees**

1. Application fee	\$ 15.00	15.00 _____
2. New Single-family dwelling	\$ 120.00	_____
3. New 2 and 3 family dwellings ( <i>per dwelling unit</i> )	\$ 60.00	_____
4. Furnace/Boiler replacement/ Mini Split ( <i>Attach Manufactures Spec</i> )	\$ 40.00	_____
5. Central Air Conditioning ( <i>List Tonnage /Size/ location</i> )	\$ 40.00	_____
6. Duct work ( <i>per Heating/AC unit</i> )	\$ 30.00	_____
7. Room heater, Wood burner, Fireplace ( <i>Spec Needed</i> )	\$ 30.00	_____
8. Alterations or Repair. <i>Please be specific.</i>	\$ 30.00	_____

*(e.g.: flue liner install, relocation of flue vent, etc.)*

**Note: Per the 2019 Residential Code of Ohio, Section 315.2.2 Alterations, repairs and additions.** In existing dwelling units, having fuel-fired appliances or an attached garage, where an application for approval is required for work involving any of the following areas or systems within that dwelling unit, the individual dwelling unit shall be equipped with carbon monoxide alarms located as required for new dwellings: *1. The addition or creation of a new sleeping room. 2. An alteration of a sleeping room. 3. An alteration in the immediate vicinity outside of a sleeping room; 4. An addition of, or an alteration to, an attached garage; 5. An addition, alteration, repair or replacement of a fuel-fired appliance.*

Subtotal		
State Fee 1% of Subtotal		\$ _____
Total Cost		<b>(Cost of Proposed Work)</b>

**(Scope of work, please be specific)** \_\_\_\_\_

Signature of Owner: \_\_\_\_\_ . **Print:** \_\_\_\_\_ .

Signature of Agent: \_\_\_\_\_ . **Print:** \_\_\_\_\_ .

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

Date Approved. \_\_\_\_\_ Inspectors Initials. \_\_\_\_\_ Zoning \_\_\_\_\_ Receipt No. \_\_\_\_\_ Permit No. \_\_\_\_\_

Date Denied. \_\_\_\_\_ Comments. \_\_\_\_\_