



**COMMUNITY DEVELOPMENT
DEPARTMENT
PERMIT & INSPECTION DIVISION
3600 KIRCHOFF ROAD
ROLLING MEADOWS IL 60008
847-506-6030 www.cityrm.org**

APPLICATION FOR MECHANICAL PERMIT

Job Site Address: _____ Apt./Suite No. _____
 Property Owner's Name: _____ Phone: _____
 Contractor's Business Name: _____ Phone: _____
 Contractor's Address: _____ City: _____ State: _____ Zip: _____
 Describe Installation: _____ Valuation of Job: \$ _____

Check All You Are Applying For:

- | | |
|---|--|
| <input type="checkbox"/> Air Conditioning
_____ TON or: _____ B.T.U.
<input type="checkbox"/> Air Handling Equipment _____ C.F.M.
<input type="checkbox"/> Air Distribution System _____ C.F.M.
<input type="checkbox"/> Boilers _____ B.T.U.
<input type="checkbox"/> Chimney Liner
<input type="checkbox"/> Floor Furnaces _____ B.T.U.
<input type="checkbox"/> Forced Air Furnace _____ B.T.U.
<input type="checkbox"/> Gas Piping (Size & Quantity)
_____ Diameter _____ Length
_____ Diameter _____ Length
_____ Diameter _____ Length | <input type="checkbox"/> Gravity Systems _____ B.T.U.
<input type="checkbox"/> Hydronic Piping System
<input type="checkbox"/> Incinerators
<input type="checkbox"/> Kitchen Exhaust System
<input type="checkbox"/> Refrigeration _____ horsepower
<input type="checkbox"/> Solar Heating System
<input type="checkbox"/> Unit Heaters _____ B.T.U.
<input type="checkbox"/> Wall Heaters _____ B.T.U.
<input type="checkbox"/> Other _____ |
|---|--|

Check One: OIL GAS LPG ELECTRIC

Check One:
 NEW REPLACEMENT ALTERATION ADDITION

Having submitted the plans and specifications, I hereby apply to the Community Development Department of the City of Rolling Meadows, Illinois for a permit to perform the above mentioned work. If this permit is granted, I will comply with all ordinances relating to the permit and pay all the required fees. I will submit the work to the required inspections. No error or omission in either plans or application, whether said plans or application have been approved by the Community Development Department or not, shall permit relieve the applicant from constructing the work in any manner than that provided for in the ordinances relating thereto.

 Applicant's Signature *
 * If agent, I certify that I am duly authorized to apply on owner's behalf.

 Date

 Community Development Department Approval

 Date

Fee: \$ _____ Project #: _____ Permit #: _____