

PERMITS AND INSPECTIONS DIVISION
CITY OF BOSSIER CITY
 620 Benton Rd. P.O. Box 5337
 Bossier City, LA 71171-5337
 Phone (318) 741-8571 Fax (318) 741-8854
 www.bossiercity.org

HVAC Permit	
Permit Number _____	
Paid _____	
Date _____	
Approved For Permit	
By _____	

APPLICATION FOR MECHANICAL PERMIT

Job Location: _____ New Bldg _____
 Contractor: _____ Phone _____ Existing _____
 To Be Installed For: _____ Residence _____
 Entire Contract Selling Price \$ _____ Fee \$ _____ Com. Bldg. _____
 Remarks: _____

Up flow Furnace BTU _____	Roof Top Units _____
Horizontal Furnace BTU _____	Package A/C Units _____
Unit Heater BTU _____	Split System _____
Duct Heater BTU _____	No. A/C Units _____
Wall Heater BTU _____	Total A/C BTU _____
Infra. Red-Electric K.W. _____	Refrig. Display Cases _____
Infra. Red-Gas _____	Refrig. Wall-In Boxes _____
Electric Furnace K.W. _____	Total Refrig. BTU _____
Strip Heater K.W. _____	Exhaust Fans _____
Hot Water Boiler BTU _____	Range Hoods _____
Steam Boiler P.S.I.G. _____	Alteration and Addition _____
No. Heating Units _____	Replacement _____
	Other _____

Certification

I, or we, hereby make application for a permit to install Heating, Air Conditioning, Mechanical refrigeration or Ventilation described above and detailed on the plans and specifications attached hereto and herein agree to comply with the provisions of all codes and ordinances applicable thereto.

There will be no inspections done on any project prior to securing a permit.

By _____
(Print Name of Applicant)
 By _____
(Signature of Applicant)