

PERMIT INFORMATION INPUT SHEET for Elect., Plumb., Mech.

PERMIT APPLICATION NUMBER: _____ Date: _____

OWNER INFO.:

Owner Name: _____ Phone: (____) ____ - _____
Address: _____
City, State, Zip: _____

APPLICANT INFO.:

Owner Name: _____ Phone: (____) ____ - _____
Address: _____
City, State, Zip: _____
Contractor License Number: _____ Class: _____

PROJECT INFO.:

Job Site Address or Location Description: _____

Assessor's Parcel Number: _____--____--_____

Description of Work: _____

Project Specific Information:

HVAC Name & Model Number: _____

Model of Furnace: _____ Btu input: _____

Btu output: _____ AFUE: _____

Model of Condensing unit: _____ Btu Cooling Capacity in tons: _____

Btu cooling Capacity: _____ SEER: _____ EER: _____

(Single Package & Split System Minimum Seer is now 13.0)

**** NOTE: Duct sealing is now prescriptively required in Climate Zone 9 thru 16. (Madera County is in Climate Zone 13 & 16.)

Will new duct work be installed: Yes / No (Circle one)

**** If yes, please indicate square footage of dwelling/building: _____

New Gas line: Yes / No (Circle one) New Electric Circuit: Yes / No (Circle one)

Ag or Well Pump Horsepower: _____

Circle Appropriate Electric Services:

Size Amps: 100, 200, 400, 800, _____ Amps, Volts: 120, 220, 440, 880, _____ Volts

Service Phase Type: 1 or 3 Phase, Service Wires: 3 or 4 Wire,

Sketch Ag Pump Location on Back of this form. (Please show cross streets, North arrow and Distances):