

MACON COUNTY Mechanical APPLICATION
INFORMATION IS REQUIRED BEFORE A PERMIT CAN BE ISSUED

New System

Change Out

Add On Air

Parcel # _____

Owners Name: _____ Phone #: _____

Owners Address: _____

Job Address: _____

Directions to Job Site including gate code if applicable: _____

Square Footage of Home: _____

*Mechanical Contractor: _____

License #: _____ Phone #: _____ Cell # _____

*Gas Company on Gas Furnace _____

License #: _____ Phone #: _____ Cell # _____

*Electrical Contractor: _____

License#: _____ Phone #: _____ Cell#: _____

IF PERMIT IS GRANTED, I AGREE TO COMFORM TO THE NORTH CAROLINA STATE BUILDING CODE AND TO ALL COUNTY
ORDINANCES AND THE LAWS OF THE STATE OF NORTH CAROLINA REGULATING SUCH WORK

Signature of Applicant: _____ Date: _____

Effective 5/24/2014 replacement to all previous applications