

**CITY OF BARBERTON
HEATING INSPECTION DEPARTMENT
576 W. PARK AVENUE, BARBERTON, OH 44203
PHONE: (330) 848-6730
FAX: (330) 848-6654**

APPLICATION FOR HVAC PERMIT

FEE _____ PERMIT _____ DATE _____

JOB LOCATION _____

OWNER _____ PHONE: _____
ADDRESS _____

CONTRACTOR _____ PHONE: _____
ADDRESS _____

APPLICATION IS HEREBY MADE FOR A PERMIT FOR A HEATING/AIR CONDITIONING UNIT AS DESCRIBED:

INSTALLATION: NEW () REPLACEMENT ()

TYPE: FURNACE () UNIT HEATER ()
BOILER () CLOSED COMBUSTION ()
STEAM () HEATER
HOT WATER () AIR CONDITIONING ()
OTHER - DESCRIBE _____

FUEL: GAS () OIL () ELECTRIC () OTHER - DESCRIBE _____

TYPE & USE
OF BUILDING: DWELLING () COMMERCIAL () APT-4 OR MORE ()
INDUSTRIAL () OTHER - DESCRIBE _____

CHIMNEY: YES () NO () TYPE A () TYPE B ()

HEAT LOSS & CONSTRUCTION DATA - MANUAL J
Outside +5 deg. F. - Inside 70 deg. F. - Temperature difference 65 deg. F.

TOTAL HEAT LOSS (BTUH) _____
APPARATUS NAME & NO. _____
MANUFACTURED BY _____
INPUT DELIVERY _____ BTUH
DESCRIPTION OF CONTROLS _____

I/WE HEREBY AGREE TO CONFORM TO THE BUILDING CODE OF THE CITY OF BARBERTON, OHIO AND THE OHIO BUILDING CODE.
I/WE CERTIFY THAT THE APPARATUS IS CAPABLE OF MAINTAINING A TEMPERATURE OF 70 DEG. F. INSIDE - +5 DEG. OUTSIDE.

OWNER _____ CONTRACTOR _____