

CITY OF MIDDLETOWN
 DIVISION OF BUILDING INSPECTION
 ONE DONHAM PLAZA
 MIDDLETOWN, OH 45042
 513-425-7973 FAX: 513-425-7921
 www.cityofmiddletown.org
 Complete all sections below. Please Print

HVAC

COMMERCIAL / INDUSTRIAL

(Includes 4 or more dwelling units)

USE GROUP

Application Date: _____ Project No. _____
 (Office Use Only)
 Job Address _____ Apt. / Unit # _____
 Owner _____ Occupant _____
 Owner's Address _____

Describe project: _____
 New Replacement Add on Remodel / Addition Over 250,000 BTUH over 5 Ton cooling
 Apartments ___# of units Condo ___# of units

WARM AIR HEATING

Total Heat Loss _____ BTUH
 Output Rating _____ BTUH
 Fire Rate _____ BTUH
 Type of Fuel _____
 F.W.A. Furnace _____
 Unit Heater _____
 Heat Pump _____
 No. of Units _____
 Roof Top Units _____
 Other _____

Electric Permit Required?
 Yes _____ No _____
 Make Up Air Required?
 Yes _____ No _____
 If yes: Size of Opening _____
 Location _____
 Source: Outside _____
 Inside _____
 Both _____
 Outside/Rooftop Units: Location of required
 light fixture _____

AIR CONDITIONING

Total Heat Gain _____ BTUH
 Net Cooling Capacity _____ BTUH
 Vertical Unit _____ BTUH
 Horizontal Unit _____ BTUH
 Electric Permit Required?
 Yes _____ No _____
 Air Condensing _____
 Water Condensing _____
 Condensate Drain to:
 Floor _____ Pump _____ Other _____
 Outside/Rooftop Units: Location of required
 light fixture _____

VENTILATION AIR

Volume of Mechanical Vent Air _____ CFM
 Temperature Differential (Vent air to tempered air) _____ °F
 Source: Natural _____ sq. in. (Max. 10°F diff.)
 Mech. _____ CFM
 Duct Smoke Detectors _____ Location _____
 Size of Combustion Air _____
 Make Up Air Required? Yes _____ No _____

HYDRONICS: Steam _____ Hot Water _____
 Combustion Air _____ sq.in.
 New _____ Replace _____ Repair _____
 Working Pressure _____ Firing Rate _____
 Type of Fuel _____
 Electric Permit Required? Yes _____ No _____
 Type of Fuel _____ Firing Rate _____

MASTER HVAC CONTRACTOR:

Name _____ Company _____
 Contact Person _____ Phone _____

PLEASE READ AND SIGN. I, the undersigned do hereby affirm: The above statements are true and correct and also agree to comply with the provision of the ordinances of the City of Middletown. I will comply with all conditions of the permit once issued. The proposed work is authorized by the owner in fee and I have the authorization to make this application. Upon notification of approval, permit fee must be paid and permit obtained within thirty (30) days, or application will be canceled. The information requested on this application may be relied upon by the City in considering the permit. Any false statement made knowingly may be grounds for criminal action under state and local law: Ohio Revised Code §2921.13, Middletown Codified Ordinance § 606.10

Master License Holder: _____
 (Please print name) (Signature)

PLEASE NOTE: This application will expire 12 months after plan approval if permit is not issued, or 12 months after application date if plans are not approved.