

City of Bono

MECHANICAL PERMIT

Ph. 870-932-0100 Fax 870-930-9040

For Mechanical Inspections Call Bono City Hall

Date of Application _____ Building Permit # (if applicable) _____

Property Address _____

Description of Work _____ Residential _____ Commercial _____ Furnace _____ A/C _____

Coil _____ Condenser _____ Split Unit _____ Package Unit _____ # of Tons

Other _____

HVAC Permit Fee: \$50.00 Plus \$18.00 Per Ton
HVAC Change Out Fee: \$40.00
Re-Inspection Fee: \$50.00

Mechanical Contractor (Company): _____

HAVCR State License # _____ Phone # _____

UNDER PENALTY OF INTENTIONAL MISREPRESENTATION AND/OR PERJURY,

I declare that I have examined and/or made this application to be true and correct to the best of my knowledge and belief. I agree to construct said improvements in compliance with all provisions for the applicable ordinances. I have been given the authorization from the property owner to obtain this permit. I realize that the information affirmed herein forms a basis for the issuance of the permit herein applied for and approval of the plans in connection therewith shall not be construed to permit any construction upon said premises or use thereon in violation of any applicable ordinance or to excuse the owner or his or her successors in title from complying therewith.

Applicant Signature _____

Notice: This permit becomes null and void if the work or construction authorized is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months at any time after the work has commenced.

For City Use Only

Amount Charged for this permit _____

City Employee Signature _____