

County of Pulaski, VA County Administration Building 143 3rd Street, NW, Suite 1 Pulaski, VA 24301 (P) 540.980.7710 (F) 540.980.7717

| VERSION 3-2020 OFFICE USE ONLY | |
|-----------------------------------|--|
| Permit #: | |
| Permit Fee: \$ | |

Mechanical Permit Application

| Date: | | | |
|--|--|----------------------------------|--------------------------------------|
| Project Address and/or Tax Maj | p #: | City: | Zip: |
| Property Owner: | | | |
| Owner's Address: | City: | St: | Zip: |
| Phone: | Email (required): | | |
| Directions: | | | |
| Description of Work: | | | |
| Value of Construction (Material | s and Labor): \$ | | |
| Is this property located in the 10 | 0-year Floodplain? Yes/N | O | |
| Who is doing the work? (circle on | e): Contractor Homeown | er | |
| Homeowners doing their own we | ork <u>MUST</u> submit a Homeo | wners Affidavit | |
| Office Use Only - Homeowner Affida | vit Submitted? Yes / NO Do | ate received: | |
| Contractor: | | | |
| Contractor Address: | | | Zip: |
| VA State License #: | Pul | aski County License # | <u> </u> |
| Main Contact Person: | | Cell: | |
| Office/Alt Phone: | Fax: | Email: | |
| (Please circle Yes or No) Plan | as Submitted: Yes / NO | Manual S/J Submitte | ed: Yes / NO |
| ** DUCT BLASTER TEST REQU | IRED PER 2015 VIRGINIA U | J NIFORM STATEWI | DE BUILDING CODE ** |
| Application is made herewith for a Mechanical Perstate and local regulations and in accordance with a Applications are processed in the order they are rec | pproved plans. The applicant further attests | that the information provided in | the application is true and correct. |
| Contractor Signature: | | | |
| Applicant Signature: | | | |