



MECHANICAL & GAS PERMIT APPLICATION

215 North Broad Street/P.O. Box 725

Monroe, Georgia 30655

PHONE: (770) 207-4674 email: dadkinson@monroega.gov

OFFICE PERMIT HOURS 8:00 a.m. until 4:00 p.m.

Construction Address: _____ Lot# _____

Contractors Name: _____

Contractors Current Address: _____

City: _____ State: _____ Zip: _____

Phone # _____ Cell # _____

Email address: _____

Permit type: (Commercial _____ or Residential _____)

Boiler 1 hp to 10 hp _____
Boiler > 10 hp _____
Each A/C System _____
Each Air intake system _____
Each Comb. Heat-A/C System _____
Each exhaust system _____
Each Grease Hood _____
Each Heating System _____
Each incinerator _____
Each Refrigerator System <5hp _____
Each Refrigerator System >5hp _____
Each Thru Wall Heat Pump _____
Each Wood or Gas Burning Htr _____
of Outlets for Gas _____

Mechanical Value of Job _____

Signature of Applicant

Print Name

Date