



Paulding County Board of Commissioners
Community Development Department - Building & Permitting Division

Watson Government Complex, Administration Building 1st Floor
240 Constitution Boulevard
Dallas, GA 30132
Phone: 770-443-7571 Fax: 770-443-7501 www.paulding.gov

MECHANICAL PERMIT APPLICATION

Form with fields: JOB ADDRESS, CITY, ZIP CODE; SUBDIVISION NAME OR NAME OF MOBILE HOME PARK, LOT #; OWNERS NAME, MAILING ADDRESS, PHONE #; CONTRACTORS NAME, MAILING ADDRESS, PHONE #; STATE CARD #, EXPIRATION DATE; RESIDENTIAL OR COMMERCIAL, BUSINESS NAME; TYPE OF WORK (NEW, ADDITION, ALTERATION, REPAIR)

MINIMUM PERMIT FEE \$30.00

NOTICE THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED HAS NOT COMMENCED WITHIN 6-MONTHS OF ISSUANCE, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6-MONTHS AFTER THE PERMIT IS ISSUED.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OF LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

IN CONNECTION WITH THE INSTALLATION OF THE APPLIANCE, THE INSTALLER OF RECORD HAS VERIFIED THAT THE OVER CURRENT DEVICE (BREAKER) IS SIZED ACCORDING TO MANUFACTURE'S SPECIFICATIONS PER THE NAME PLATE RATING OF THE APPLIANCE.

SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT DATE

SIGNATURE OF OWNER DATE

PAULDING COUNTY MECHANICAL FEE SCHEDULE

HEATING

TYPE OF EQUIPMENT OR SYSTEM: _____

NAME & MODEL OF EQUIPMENT: _____

INPUT BTU'S: _____

NET LOAD BTU'S PER UNIT: _____

COOLING

TYPE OF EQUIPMENT OR SYSTEM: _____

NAME & CATALOG NUMBER: _____

RATING OF EQUIPMENT: _____

NET LOAD TONS PER UNIT: _____

VENT SIZE: _____ BRICK () STEEL () GAGE OR TYPE: _____

FUEL: NATURAL GAS () OIL () ELECTRIC () OTHER: _____

REMARKS: _____

BTU INPUT	FEE	BTU INPUT	FEE
0 - 50,000	\$15.00	601,000 - 800,000	\$20.00
51,000 - 100,000	\$15.00	801,000 - 1,000,000	\$22.00
101,000 - 150,000	\$15.00	1,001,000 - 1,500,000	\$26.00
151,000 - 200,000	\$15.00	1,501,000 - 2,000,000	\$30.00
210,000 - 250,000	\$15.00	2,001,000 - 2,500,000	\$34.00
251,000 - 300,000	\$16.00	2,501,000 - 3,000,000	\$35.00
301,000 - 400,000	\$17.00	3,001,000 - 4,000,000	\$46.00
401,000 - 500,000	\$18.00	PLUS \$1.00 PER 100,000 BTU INPUT IN EXCESS OF 4,000,000 BTU INPUT	
501,000 - 600,000	\$19.00		

COMPRESSOR HORSEPOWER	FEE	COMPRESSOR HORSEPOWER	FEE
1	\$15.00	25	\$30.00
1.5 - 2	\$15.00	30	\$34.00
3	\$15.00	40	\$41.00
5	\$15.00	50	\$47.00
7.5	\$15.00	60	\$52.00
10	\$17.00	75	\$60.00
15	\$22.00	100	\$72.00
20	\$26.00	PLUS \$1.00 OVER EACH 100 HORSEPOWER OR TON	

GAS LINE: \$5.00 FIRST 4 OUTLETS, THEN \$1.00 EACH ADDITIONAL OUTLET

WOOD STOVE INSPECTION: \$30.00

PRE-FAB FIREPLACE: \$30.00

SIGNATURE OF LICENSED HVAC CONTRACTOR

CARD NO.



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AFFIDAVIT - SUPPLEMENTAL FOR HOMEOWNERS

For and in consideration of the forbearance of Business License and State Contractors License requirements placed on commercial builders, the undersigned hereby applies for the special considerations as a property owner desiring to perform construction, Electrical, Plumbing or Mechanical on his/her residence. In making this request for a Permit, the undersigned certifies the following true:

This Affidavit is for: CHECK ALL THAT APPLY

Residential Bldg Electrical Plumbing Mechanical All the above

Homeowners Name: _____

Property Address: _____

City: _____ State _____ Zip: _____

District/Section: _____

1. Applicant understands that this permit is being issued to him/her on the basis that he/she will perform the work him/herself.
2. Applicant will function as the sub-contractor and will perform all related work and accept inherent responsibilities for the work authorized by this permit.
3. Property described in permit application is currently owned by the undersigned.
4. Applicant agrees to perform work in accordance with applicable Paulding County and or state code and strictly adhere to the inspection schedule of the Paulding County.

Applicant further deposes that he/she is aware at any time this permit can and will be revoked if any false statement or misrepresentation as to the material fact in the application on which the permit is issued.

Signature

Phone

Swore to before me and subscribed
 In my presence this _____ day
 of _____, 20__.

Notary Public
