

**APPLICATION  
CITY OF GRAHAM  
MECHANICAL PERMIT**

**BUILDING PERMIT #:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

Contractor: \_\_\_\_\_

New/Existing: \_\_\_\_\_

Phone: \_\_\_\_\_

Residential/Commercial: \_\_\_\_\_

License #: \_\_\_\_\_

Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Architect/Engineer: \_\_\_\_\_

Furnace: \_\_\_\_\_

Air Conditioner: \_\_\_\_\_

Condensing Unit: \_\_\_\_\_

Heat Pump: \_\_\_\_\_

Package Unit: \_\_\_\_\_

Split System: \_\_\_\_\_

Gas Pack: \_\_\_\_\_

Hood System: \_\_\_\_\_

Other: \_\_\_\_\_

**ESTIMATED COST:** \_\_\_\_\_

**FEE:** \_\_\_\_\_

The applicant hereby agrees to begin the work herein specified at once and agrees to notify the City of Graham Inspection Department immediately upon completion so a final inspection can be scheduled as required by law.

\_\_\_\_\_  
contractor's signature

Call Inspection Department at 336 570-6705 to obtain permit fee.

Mail completed form with check to: City of Graham  
Inspection Department  
P O Drawer 357  
Graham NC 27253