

# CITY OF HOUSTON



ON-LINE PERMIT SERVICES

## Commercial HVAC Inspection

This is a permit application for Commercial HVAC within the city limits of Houston, Texas.  
Carefully complete all necessary information.

Project No.

Date

( Fields marked with "\*" are required )

Key Map No.

Zone

Job Address\*

Zip\*

Occupant

### Licensee

Name\*

Phone #\*

License #\*

City

Company Name\*

Zip\*

Company Address\*

State

### Occupancy

Apartments  Single or Duplex Residence  Commercial

### Nature of Construction

Remodel  New Building  HVAC Work Only

Describe work to be performed under this permit

# CITY OF HOUSTON

## Commercial HVAC Inspection continued- Page 2 of 2

Click the box next to the type of work being performed ( column I ). Enter the total tonnage or HP in the next box ( column II ).

	( I )		( II )		( III )
<input type="checkbox"/>	1	Ventilation	<div style="font-size: small; margin-bottom: 5px;">Enter Quantity or Dollar Amount</div> <input style="width: 100px; height: 20px;" type="text"/>	\$ Total Price	<input type="checkbox"/> 1 Duct <\$500
<input type="checkbox"/>	1	Alter HVAC	<input style="width: 100px; height: 20px;" type="text"/>	\$ Total Price	<input type="checkbox"/> 1 Locl VNT Only
<input type="checkbox"/>	1	Chiller or AHU	<input style="width: 100px; height: 20px;" type="text"/>	Total Tons <input type="checkbox"/> 1/4	<input type="checkbox"/> 1 OverTime Insp
<input type="checkbox"/>	1	New A/C System	<input style="width: 100px; height: 20px;" type="text"/>	Total Tons <input type="checkbox"/> 1/4	<input type="checkbox"/> 1 <input type="radio"/> AT <input type="radio"/> AU
<input type="checkbox"/>	1	Industrial Ref	<input style="width: 100px; height: 20px;" type="text"/>	Total HP	<input type="checkbox"/> Reinspection
<input type="checkbox"/>	1	Replace Heater	<input style="width: 100px; height: 20px;" type="text"/>	\$ Total Price	<input type="checkbox"/> 1 AD
<input type="checkbox"/>	1	Heat Only Sys	<input style="width: 100px; height: 20px;" type="text"/>	\$ Total Price	<input type="checkbox"/> 1 4H
					<input type="checkbox"/> 1 AY

### Non-Fee Receipts

<input style="width: 60px; height: 20px;" type="text"/>	Insurance
<input style="width: 60px; height: 20px;" type="text"/>	Balance Due
<input style="width: 60px; height: 20px;" type="text"/>	License Renewal