

Mechanical Permit Application-Fireplace Town of Waxhaw PO Box 6 Waxhaw, NC 28173

704-843-2195

Email Completed Application to: Inspections@waxhaw.com www.waxhaw.com

Permit Nu:	Date Submitted:
Residential Project:	Commercial Project:
Contractor Name:	Contact Nu.:
Contractor Address:	NC License Nu:
Contractor City/St/Zip:	Email:
Owner Name:	Contact Nu:
Owner Address:	
Owner City/St/Zip:	
Subdivision Name:	Parcel Nu.:
Street Address:	Lot Nu:
Nu. Heat Pumps:	Nu. Gas Ovens
Nu. Gas Furnace	Nu. Gas Ranges
Nu. Gas Grills	Nu. Gas Water Heaters
Nu. Gas Logs:	Nu. Other Equipment
Total Cost of Project:	
Description of Project:	
Applicant Name:	Contact Nu:
Applicant Address:	
Applicant City/St/Zip:	
the best of knowledge and belief is correct. I fur	t I am an authorized agent for all parties concerned and that all submitted information, to ther attest that the permit holder will comply with all applicable state and local laws, rules all in revocation of the permit and/or other actions as provided by law.
Signature Field	Date: