

**UPPER PROVIDENCE TOWNSHIP
DEPARTMENT OF LICENSES AND INSPECTIONS
MECHANICAL PERMIT APPLICATION**

ALL WORK SHALL CONFORM TO THE INTERNATIONAL MECHANICAL CODE AS APPLICABLE TO THE UCC

Street Address (Job) _____ Date _____

Property Owner Name _____ Telephone # _____

Contractor Name _____ Telephone # _____

PA Home Improvement Contractor registration # _____

Contractor's Certificate of Insurance is required with each application.

Please select one of the following:

Residential _____ Commercial _____

New _____ Repair _____ Replace _____

Emergency job? Yes/ No

Absorption System _____	Fireplace Stove/ Insert _____
Air-Conditioning System _____	Forced-Air Furnace _____
Air-Distribution System _____	Heat Pump _____
Automatic Fire Suppression System _____	Heating Oil Tank _____
Boiler _____	Natural Gas Line & Tie-in _____
Clothes Dryer _____	Pellet Fuel-Burning Appliance _____
Commercial Kitchen Exhaust _____	Propane Tank _____
Damper only _____	Radiant Heater _____
Ductwork only _____	Refrigeration System _____
Energy Recovery System _____	Smoke Control System _____
Factory-Built Fireplace _____	Vented Wall Furnace _____
Fire Suppression System _____	Unit Heater _____

ALL WORK IS REQUIRED TO BE INSPECTED PRIOR TO CONCEALMENT AND UPON COMPLETION – CALL LINN ARCHITECTS @ 610-566-7044 TO SCHEDULE

****Permits may be emailed or picked up in person at the Township Building Please select below:**

I will pick up _____ Please email to _____

I hereby certify that the statements contained herein are true to the best of my knowledge and belief.

Applicant signature _____ COST OF JOB* _____

*** Attach copy of invoice/contract/work order**

OFFICE USE ONLY			
Application Date _____	Fee Paid _____	Check # _____	Rec'd by: _____
Permit # _____	Date issued: _____	Rec'd from: _____	