



BOONE COUNTY

BUILDING INSPECTION

Boone County Building Department
 2950 Washington Street/PO Box 960
 Burlington, Kentucky 41005
 859-334-2218
 859-334-3137 Fax
 www.boonecountyky.org

HVAC CONSTRUCTION PERMIT APPLICATION: ONE & TWO FAMILY DWELLINGS

Job Location _____
 (Street Address) (Lot Number)

 (Subdivision) (City)

Identification	Name	Address	City/State/Zip	Phone
Owner				
HVAC Contractor KY Master License#:				
Permit Applicant				
Applicant Email Address				
Applicant Fax Number				

CHECK EACH BOX THAT APPLIES:

- | | | | |
|---|------------------------|---|--------------------------------------|
| <input type="checkbox"/> New Construction | Number of Units: _____ | <input type="checkbox"/> Single Family Dwelling | <input type="checkbox"/> Modular |
| <input type="checkbox"/> Existing Unit | Number of Units: _____ | <input type="checkbox"/> Duplex | <input type="checkbox"/> Mobile Home |

Date of Sizing Calculations: _____ Orientation of Structure: _____

Summer Design Conditions: _____ Winter Design Conditions: _____

Square Footage: System 1 _____ System 2 _____ System 3 _____ System 4 _____ System 5 _____

Heat Gain: System 1 _____ System 2 _____ System 3 _____ System 4 _____ System 5 _____

Heat Loss: System 1 _____ System 2 _____ System 3 _____ System 4 _____ System 5 _____

TYPE OF HEATING: _____ Gas _____ Oil _____ Electric _____ Geothermal

COST OF CONSTRUCTION: \$ _____ CODE USED: 2018 Kentucky Residential Code

HVAC PERMIT FEES:

First system = \$105.00

PLUS _____ # of additional systems X \$50.00 = _____ Equals _____ Total Permit Cost

Note: The Boone County Building Department is issuing this HVAC construction permit upon your request in accordance with KRS 198B.6671 and 815 KAR 8:070. You, the undersigned, are fully aware that you are responsible for this installation in its entirety through completion. It is your responsibility to notify, request and obtain all required inspections. If for any reason you fail to complete the installation, it shall be your responsibility to notify the Department immediately.

APPLICANT SIGNATURE: _____ **DATE:** _____

Building Official Approval	Date Issued	Permit Number	Fee Paid