



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 Replacement CONSTRUCTION PERMIT APPLICATION: 1 & 2 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:

Replace Heating Replace A/C Modify Ductwork Other: _____

EST. Installation Date: _____ Estimated Cost of Replacement: \$ _____

EXISTING TYPE OF HEATING: ___ Gas ___ Oil ___ Electric ___ Geothermal ___ Other

SIZE OF OLD UNIT: _____

NEW TYPE OF HEATING: ___ Gas ___ Oil ___ Electric ___ Geothermal ___ Other

SIZE OF NEW UNIT: _____

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