

City of North Muskegon Mechanical Permit Application

PLEASE PRINT ALL INFORMATION

Job Information:	Date: _____
Job Address: _____ House Number and Street Name	Job Value: _____
Class of Work: <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair	
<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Other Please Specify _____	
Description of Work: _____ _____	
Use of Bldg: _____ Change Use to: _____	
Special Conditions: _____	

Property Owner Information:	Cell Phone/Daytime Number (____) _____
Name: _____	Other Number (____) _____
Mailing Address: _____	
Street	City State Zip Code

Contractor Information:
Name: _____ Mailing Address: _____
Daytime Phone Number: (____) _____ License Number _____

NOTICE

This permit becomes null and void if work or construction authorized is not commenced within sixty (60) days, or if construction or work is suspended or abandoned for a period of 120 days at any time after work is commenced. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not: the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction of the performance of construction.

Signature of Contractor (or Agent): _____ Date: _____

Signature of Owner (if owner is builder): _____ Date: _____

For Department Use Only	
Notes and Data: _____ _____	
Mechanical Permit Number _____	Permit Fee \$ _____
Approval Signature _____	Date _____