

Section I. To be completed by the applicant

NOTE: Plumbing, HVAC, and Electrical contractors must obtain City of Wahoo license to work within Wahoo zoning jurisdiction.

Job Address				
Legal Description	Lot No.	Block	Tract	See Attached Sheet
Owner	Mail Address			Phone
HVAC Contractor	Mail Address			Phone
Architect or Designer	Mail Address			Phone
Engineer	Mail Address			Phone
Lender	Mail Address			Phone
Use of Building				
Class of Work: (Circle one) NEW ADDITION REPAIR ALTERATION				
Describe Work				
Special Conditions:				

Section II Permit Fees -- to be completed by Building Inspector

Item	# X Fee	Cost
FAU up to 100,000 BTU	_____ x 20.00	
FAU over 100,000 BTU	_____ x 30.00	
Air Conditioner	_____ x 20.00	
Heat Pump	_____ x 20.00	
PLEASE COMPLETE INFORMATION ON BACK		
Permit Issuance Fee		\$25.00
Total Fee		\$

TYPE OF FUEL: _____

Section III. Instructions to Permittee

NOTE: Applicant is responsible for locating any buried utilities that could be encountered during construction. This can be done by contacting Diggers Hotline of Nebraska at **811** two working days before starting your project.

A Certificate of Occupancy is required on new construction.

ALL WORK IS SUBJECT TO INSPECTION (SEE INFORMATION ON BACK).

This permit shall be maintained available until final approval has been granted by the building official. THE PERSON DOING THE WORK shall notify the building official that such work is ready for inspection. 24 hour advance notice is requested (Call 443-3222 to arrange an appointment)

Except where an extension has been obtained in writing from the Building Inspector, permits issued shall expire within ninety (90) days if the work described in the permit has not begun or the use applied for has not been established and within one year if the work has not been completed.

I will commence work _____ and complete the same on or about _____ and will in all respects construct the work according to provisions of the ordinances of the City of Wahoo.

Applicant: _____

This application becomes a CONSTRUCTION PERMIT only after being validated by the Building Inspector's signature.

Date approved: _____

Building Inspector: _____

**CITY OF WAHOO
SUPPLEMENTAL MECHANICAL PERMIT INFORMATION
FOR AIR CONDITIONERS, HEAT PUMPS, AND GAS FURNACES**

Job Address: _____

Date Installed: _____

Owner: _____

AIR CONDITIONER AND HEAT PUMP INFORMATION

(____) Air Conditioner (____) Air Source Heat Pump (____) Ground Source Heat Pump

Brand of Equipment: _____

Condensing Unit Model: _____

Indoor Coil Model: _____

Cooling Capacity (MBTUH): _____

SEER (1 phase): _____

EER (3 phase): _____

Heating Capacity (MBTUH): _____

HSPF (1 phase): _____

C.O.P. (47 F): _____

C.O.P. (17 F): _____

Time Delay: _____ How Long? _____

Is there an LMT at this location? _____ Is the LMT connected? _____

Is this a: (____) New installation
 (____) Replacement of a central unit
 (____) Replacement of a room air conditioner(s)
 (____) Replacement of a gas air conditioner
 (____) Other - Explain _____

Type of backup heat:
 (____) Existing gas furnace
 (____) New gas furnace
 (____) Electric
 Kilowatts installed _____
 (____) Other - Explain _____

GAS FURNACE AND GAS BOILER INFORMATION:

(____) Natural Gas (____) Propane

Name of Manufacturer _____

Model Number _____

Size (Input) _____ MBTUH

Efficiency Rating _____ % AFUE