

**City of Decorah Building Inspections Department**

400 Claiborne Drive / P.O. Box 138

Decorah IA. 52101

Phone: (563) 382-3651

[www.decorahia.org](http://www.decorahia.org)

Date Rec'd \_\_\_\_\_

Permit No. \_\_\_\_\_

Permit Fee: **\$100.00**

**Mechanical (HVAC) Permit Application**

Mechanical permit required on new construction, major remodel projects and includes fireplaces

A permit **MUST** be issued prior to commencement of work.

Please return to the City of Decorah Building Department or via email to [gswanson@decorah.iowa.gov](mailto:gswanson@decorah.iowa.gov)

Project address: \_\_\_\_\_ Addition \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_ Zone \_\_\_\_\_

If dwelling was built prior to 1978, please follow Federal EPA and Iowa Dept of Health lead guidelines and abatement rules.

Permit Applicant.  Owner  Mechanical Contractor  Contractor

Property Owner \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone\_(\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Mechanical Contractor (if not Property owner) \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone\_(\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

State License/ID # \_\_\_\_\_

Engineer/Designer \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone\_(\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

State License/ID # \_\_\_\_\_

Valuation of Work \$ \_\_\_\_\_ (include Labor and Material)

Description of Work: \_\_\_\_\_

Class of Work.  New  Addition  Remodel  Repair  Residential  Commercial  Other

Type of Building \_\_\_\_\_

Notice: 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 this permit does not presume to give authority to violate or cancel the provision of any other state or local law regulating construction or the performance of construction. Any unapproved construction made herein shall make the application invalid.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

For office use only

Building/ Zoning Approval Signature

Approval Date