



76 E HIGH STREET, SPRINGFIELD, OHIO 45502 PHONE: (937) 324-7389 FAX: (937) 328-3558

REQUIREMENTS TO OBTAIN HVAC PERMIT

- 1) **Replacement units without ductwork replacement or gas line change out.**
 - a. Submit specification sheet (manufacturers sheet with unit installed highlighted)
 - b. Venting detail: High efficiency PVC vent new run location; does water heater vent still meet vent table if vented to same location.
 - c. Heat loss/ gain work sheets (Manual J)
- 2) **Replacement units with ductwork /gas line modification.**
 - a. Detailed floor plan showing location of units with duct sizes and what room it is feeding, venting details; if in attic or crawlspace installation, needs insulation specification and manufacturing installation sheets.
- 3) **New installations.**
 - a. Detailed drawing with location, venting (also bath fans) termination, duct size and runs, gas line schematic, heat loss/ gain work sheets (Manual J), manufacturers specifications on units installed. Heating and cooling equipment must match building energy code as submitted.
- 4) **Geo Thermal, same as above.**
 - a. Plumbing schematic as proposed.
- 5) **Other requirements for all units.**
 - a. General location of equipment: attic – crawl – basement – closet- etc.
 - b. New installations location, electric requirements (GFCI receptacle) AC unit service size.

PLAN APPROVAL APPLICATION

HVAC

PROJECT		IWORQ #	
ADDRESS		DATE	
OWNER		PHONE	
CONTRACTOR		PHONE	
		FAX	

RES	COM	TYPE	FEE	TOTAL
		APPLICATION FEE	\$ 40.00	\$ 40.00
		PLAN REVIEW (Commercial 1/2 for replacements)	\$100.00	
		PLAN REVIEW (Residential)	\$ 20.00	
		HEATING/COOLING		
		New Furnace system with AC (2)	\$ 90.00ea	
		New furnace system only (2)	\$ 90.00ea	
		Replacement Furnace with AC (1)	\$ 45.00ea	
		Replacement Furnace Only (1)	\$ 45.00ea	
		New AC Unit (1)	\$ 45.00ea	
		Replacement AC (1)	\$ 45.00ea	
		Unit/Radiant Heaters (1)	\$ 45.00	
		Additional Units - \$2.00 ea	\$ 2.00 ea	
		Package Rooftop Units (1)	\$ 45.00	
		Ductwork / Alteration (1)	\$ 45.00	
		FIREPLACE (Wood or Gas-- pre-fabricated) (1)	\$ 45.00	
		Solid Fuel Appliance (1)	\$ 45.00	
		Chimney Liner – when not part of furnace System Installation (1)	\$ 45.00	
		VENTILATION EQUIPMENT (1)	\$ 45.00	
		COMMERCIAL REFRIGERATION (1)	\$ 45.00	
		COMMERCIAL RANGE HOOD (vent/duct) (Hood fee includes plan review)	\$ 250.00	
		INFORMATIONAL INSPECTIONS	\$ 45.00	
		ADDITIONAL INSPECTIONS	\$ 45.00	
		INVESTIGATION FEE (\$200 – 1,000.00)	\$200.00 min	
		SUB TOTAL		
		OBBS fee (3% commercial)		
		OBBS fee (1% residential)		
		TOTAL FEES DUE		

SEE NOTES ON REVERSE SIDE

Signature: _____ **Title:** _____

Print Name: _____ **Phone:** _____

NOTES

Numbers in parenthesis indicate the number of inspections provided.

Commercial plans, which include the technical design analysis, shall bear the seal of a design professional and must include calculations as required.

Work started prior to securing the required permits are subject to a minimum investigation fee of \$200.00. Emergency work, if agreed to by the Chief Building Official, shall be exempt from the investigation fee.

Only the person performing the work may obtain a permit and schedule inspections.

Payments for all permits must be made prior to requesting an inspection.

Installation requiring inspections must not be covered until approved. Failure to receive approval may result in orders requiring the removal of such covering.

Installations must be in accordance with Ohio Mechanical Code (OMC), the current edition of the adopted Ohio Building Code (OBC), OBOA and referenced documents.

Requests for field inspections must be made a minimum of 24 hours in advance and will be scheduled for the next working day.

Applicants on the schedule for the day's inspections may contact the respective inspectors during the morning from 8:00 am to 8:45 am for consultation or scheduling time.

An additional \$45.00 re inspection fee may be imposed for work that is not properly installed, is not ready for inspection, has changed from the approved plans or is not accessible at the time of the inspection.

FOR RESIDENTIAL PLAN SUBMITTAL ONLY

Type of Fuel		
Heat Gain/Loss (submit calculations)		
Equipment Type		
Combined BTU Rating of all Appliances & Equipment discharging into vent		
Location of Appliance		
Chimney/Vent	Type	
	Size	
	Height	
Connector	Size	
	Rise	
	Single or Double Wall	
Source of Combustion Air		

PROVIDE ADDITIONAL DETAILS OR DRAWINGS BELOW

Installations must be in accordance with the Ohio Mechanical code, the current edition of the adopted Ohio Building Code, the Residential Code of Ohio and Referenced Documents