



TOWN OF DOVER
APPLICATION FOR MECHANICAL/HVAC PERMIT

Applicant _____ Date _____

Business Name _____ Phone No. _____

Address _____

License Type Held _____ Lic.# _____

Address of Install work _____

Homeowner _____ Phone No. _____

Check all that apply: New Work Replacement Renovation/Remodel Addition to Existing
 Total Cost of Job \$ _____

Number of Units	Bsmt	1 st Floor	2 nd Floor	3 rd Floor	Ground	Roof
Air Condenser						
Air Handler*						
Appliance						
Boiler/Furnace*						
Direct Vent Appl						
Exhaust Fan						
Generator						
Heat Pump						
Hydro Air System						
HVAC System*						
Sump Pump						
Range Hood						
Ventilation Fan						

* Requires manuals S, J and D to accompany application for new construction or new replacement systems. Design conditions based on Framingham, MA.

I certify that I have the authority to apply for the permit for the above work and that the information provided is true and accurate to the best of my knowledge and that all work and installation will comply with the provisions of the Massachusetts State Building Codes and Amendments, ICC Mechanical Code, ICC Energy Conservation Code and the by-laws of the Town of Dover.

Signature: _____

Fee: \$10 per \$1,000. MIN FEE \$100.

Print Name: _____

FEE DUE _____