

Date: _____

Permit # MP _____

Permit Fee: _____

MECHANICAL PERMIT APPLICATION

City of Newport News
Department of Codes Compliance
2400 Washington Avenue 3rd floor, Newport News, Virginia 23607
757-933-2311/757-926-8311 (fax)
www.nnva.gov/codes-compliance

Application #: _____

Associated _____

Building Permit #: _____

Project Address: _____ Unit: _____ Parcel ID: _____

Applicant (Check One) → Owner Contractor Agent Design Professional

<input type="checkbox"/> Property Owner	<input type="checkbox"/> Tenant	Applicant Name _____	Phone # _____
Name _____		Applicant Address _____	
Address _____		Contractor Business Name _____	Phone # _____
City/State/Zip _____		Contractor Address _____	
Phone # _____	Fax # _____	Contractor State License # _____	Class <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C CID # _____
Email Address _____		Email/Other Contact Information _____	

Work to be performed on:

Type of work:

Residential

Commercial

Multi-Family

New

Addition

Project Cost \$ _____

Repair/Alt

Other

I agree to perform the proposed work in conformance with the Virginia Uniform Statewide Building Code and the ordinances and regulations of the City of Newport News.

Print name _____ Signature _____ Date _____

Remarks _____

QUANTITY & TYPE OF DEVICES/EQUIPMENT

_____ Boiler	_____ Pre-Fab Fireplace – NG	_____ Fire/Smoke Dampers	_____ Type I Kitchen Exhaust Hood
_____ Furnace	_____ Pre-Fab Fireplace – LP	_____ Residential Bath Fan	_____ Type II Kitchen Exhaust Hood
_____ Central A/C	_____ Pre-Fab Fireplace – Wood	_____ Residential Kitchen Hood	_____ Grease Duct
_____ Heat Pump	_____ Gas Log Set – NG	_____ Steam Piping	_____ Gas Piping
_____ Rooftop Unit	_____ Gas Log Set – LP	_____ Hot Water Piping	_____ Other
_____ Package Unit	_____ Exhaust System	_____ Chilled Water Piping	
_____ Space Heater	_____ Ventilation System	_____ Geothermal Piping	
_____ Air Handler/Fan Coil/VAV	_____ Air Distribution System	_____ Refrigeration Piping	
_____ Chiller	_____ Make-Up Air System	_____ Refrigeration Equipment	

FUEL STORAGE AND DISTRIBUTION

_____ LP _____ Fuel Oil _____ Gasoline _____ Other

_____ Aboveground Tank _____ Manufacturer _____

_____ Underground Tank _____ Capacity _____

Office Use Only

Remarks: _____

Cash: _____ Check: _____ Escrow: _____

Customer ID #: _____

Approved By: _____ Date: _____

Cashier: _____