

MECHANICAL

Permit Application

City of Dothan, Alabama
 Permits and Inspections
 (334) 615-4450
permits@dothan.org



Applicant/Company Name: _____

Applicant Phone Number: _____

Applicant Type: Owner - *Proof of ownership must be provided.*
 Contractor - City License #: _____ State License #: _____

Property Address: _____

Property Owner: _____

Property Owner Phone Number: _____

Scope of Work: _____

Job Value: \$ _____

Note: The individual obtaining the plumbing permit shall certify that they have inspected the sewer lateral stub-out to confirm it is free from defects and open to the main sewer line.

Permit Type:

Mechanical/HVAC
 Refrigeration

Building Use:

1 & 2 Family
 Apartments
 Commercial
 Church
 Institutional
 Other

Class of Work:

New
 Alteration
 Addition
 Repair

Please initial that you have read and agree to comply with the following statement.

_____ **I understand that I am responsible for the removal of ALL debris related to this project.**

I certify that I have read this document and state that the information provided is correct. I agree to comply with all local ordinances and state laws dealing with building construction, and hereby authorize representatives of the City of Dothan to enter the above-mentioned property for inspection purposes.

Applicant Signature: _____

Date: _____

For Office Use:

DATE	IST		
FEE AMT	PERMIT #		
PAYMENT TYPE			
CK	CC	CA	ES