

**CITY OF CLARKSDALE
INSPECTION DEPARTMENT
MECHANICAL PERMIT APPLICATION**

HOUSE NUMBER _____ STREET _____

(A) LOT # _____ LOCK # _____ SUBDIVISION _____

(B) SHORT PARCEL# _____ LONG PARCEL# _____

(C) LEGAL DESCRIPTION _____

*****SECTION A, B, OR C MUST BE COMPLETED ON ORDER TO RECEIVE A PERMIT*****

APPLICANT'S NAME _____ ADDRESS _____

TELEPHONE NUMBER _____ FAX # _____

PROPERTY OWNER'S NAME: _____ PROPERTY OWNER'S PHONE _____

MECHANICAL CONTRACTOR INFORMATION:

NAME AND ADDRESS OF CONTRACTOR: _____

PHONE NUMBER OF CONTRACTOR _____ FAX NUMBER _____

CITY OF CLARKSDALE PRIVILEGE LICENSE NUMBER _____

STATE OF MISSISSIPPI OR OTHER LICENSE NUMBER _____

BRIEF DESCRIPTION OF WORK TO BE PERFORMED _____

ITEM	VALUATION OR RATE	UNITS	FEE
CENTRAL HEATING & AIR CONDITIONING - BTU			
BOILERS – BTU	\$5.00		
33,000 TO 165,000	\$10.00		
331,000 TO 1,165,000	\$15.00		
1,166,000 TO 3,300,000	\$25.00		
OVER 3,300,000	\$35.00		
INITIAL ISSUE FEE			\$30.00
		TOTAL	

*****FEE BASIS - \$10.00 FOR 1ST \$1,000 OF VALUE PLUS \$2.00 PER ADDITIONAL \$1,000 OR FRACTION THEREOF*****

IN ORDER TO RECEIVE A MECHANICAL PERMIT WE MAY NEED TO HAVE A PLOT PLAN DRAWING AND/OR PLANS OF THE WORK. THIS WILL BE AT THE DISCRETION OF THE INSPECTIONS DEPARTMENT.

SIGNATURE OF APPLICANT _____ DATE _____