



**Village of Chagrin Falls – Building Department**  
**RESIDENTIAL MECHANICAL PERMIT APPLICATION**

Village Hall 21 W. Washington St. Chagrin Falls, OH 44022  
 Phone # 440-247-5050 – Fax # 440-247-2082

Building Inspector: Harry Edwards Email: [Harry@chagrin-falls.org](mailto:Harry@chagrin-falls.org) Direct: 440-247-3156  
Building Administrative Assistant: Katie Knauff Email: [Katie.Knauff@chagrin-falls.org](mailto:Katie.Knauff@chagrin-falls.org)

Permit # _____
Approved by: _____
Total Due: _____

General Requirements:

- 1) Mechanical Permit fee for addition/alteration/replacement = **\$50**; For A/C units additional **\$5/per ton** (round up).
  - 2) Site plan is required to be submitted with this form, showing location of condenser. **SIDE & REAR YARDS ONLY.**
  - 3) The RCO systems description form, listed below, may be submitted in lieu of fully detailed plans for HVAC systems.
  - 4) For **NEW** construction or **REMODELS** to bathroom/kitchen/home where a minor building permit is required; general contractor is to submit combination residential building permit application form & pull all permits for whole job.
  - 5) **This permit application is for when Mechanical work only is taking place.**
  - 6) Contractors must be registered with the Village of Chagrin Falls **PRIOR TO START DATE.**
  - 7) **INSPECTIONS MUST BE SCHEDULED FOR DAY OF INSTALLATION/JOB COMPLETION DAY. CONTRACTOR MUST BE ON SITE.**
- ONLY COMPLETE APPLICATIONS WILL BE ACCEPTED. SEE ABOVE FOR ADDITIONALLY REQUIRED INFORMATION.**

<b>Address of Jobsite:</b> _____	<b>Est. Cost of Construction:</b> \$ _____	<b>Start Date:</b> _____
<b>Description of Work:</b> _____		

**PROPERTY OWNER'S INFORMATION:**

- Name: \_\_\_\_\_
- Address: \_\_\_\_\_
- Email: \_\_\_\_\_
- Phone #: \_\_\_\_\_

**CONTRACTOR'S INFORMATION:**

- Name: \_\_\_\_\_
- Address: \_\_\_\_\_
- Email: \_\_\_\_\_
- Phone #: \_\_\_\_\_

**APPLICANT'S INFORMATION:** (If applicant is the property owner or contractor please indicate)

- Name: \_\_\_\_\_
- Address: \_\_\_\_\_
- Email: \_\_\_\_\_
- Phone #: \_\_\_\_\_

**Residential Code of Ohio (RCO) Systems Description Form – HVAC System Description**

<u>Heating Equipment Type, Size &amp; Efficiency</u>	<u>Design Heat Loss (Btu/h)</u>	<u>Type of Fuel</u>	<u>Location of Equipment</u>
<input type="checkbox"/> Forced Air    Btu/h _____ Eff. _____ <input type="checkbox"/> Boiler        Btu/h _____ Eff. _____ <input type="checkbox"/> Heat Pump    Btu/h _____ Eff. _____ <input type="checkbox"/> Electric       kW _____ Eff. _____ <input type="checkbox"/> Geothermal   kW (Btu/h) _____ Eff. _____		<input type="checkbox"/> Natural Gas <input type="checkbox"/> LP <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> Other _____	<input type="checkbox"/> Basement <input type="checkbox"/> Attic <input type="checkbox"/> Closet <input type="checkbox"/> Crawl Space <input type="checkbox"/> Outdoor
<u>Cooling Equipment Type, Size &amp; Efficiency</u>	<u>Design Heat Gain (Btu/h)</u>		<u>Location of Equipment</u>
<input type="checkbox"/> AC              Btu/h _____ Eff. _____ <input type="checkbox"/> Heat Pump    Btu/h _____ Eff. _____ <input type="checkbox"/> Geothermal   kW(Btu/h) _____ Eff. _____			<input type="checkbox"/> Outdoor <input type="checkbox"/> Other _____
<u>Area of Conditioned Space (sq. ft.)</u>	<u>Duct Size (Supply and Return)</u>		

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date