



City of Gravette
MECHANICAL PERMIT

City of Gravette
202 Main St. NE
Gravette, AR 72736
P: 479-787-5757
F: 479-787-5018

Project address:	Property owner:
Property owner address:	Phone number:

PERMIT TYPE
Residential <input type="checkbox"/> New construction <input type="checkbox"/> Remodel
Commercial/Industrial <input type="checkbox"/> New construction <input type="checkbox"/> Remodel
Submittal Checklist <input type="checkbox"/> Permit application <input type="checkbox"/> Copy of license <input type="checkbox"/> Copy of gen. liability <input type="checkbox"/> Copy of load calc. <input type="checkbox"/> Number of HVAC Units:

Contractor:	Phone number:
Mailing address:	Email address:
License number: (include a copy)	License exp. date:
Contractor's license number:	License exp. date:

PROJECT DETAILS

Project start date:	Project end date:	Project cost:
Description of project:		

ANY NEW CONSTRUCTION OR SUBSTANTIAL REMODEL MUST SUBMIT A COPY OF THE LOAD/MANUAL J CALCULATION.

This permit becomes null and void if authorized work or construction has not begun within six months, or if construction or work is suspended or abandoned for a period of six months, at any time, once work is started.

I hereby certify that I have read and examined this document and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied whether specified herein or not. Granting a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT _____ PRINTED NAME _____ DATE _____

FOR OFFICE USE ONLY

MECHANICAL PERMIT FEES

Total project cost	Fee
\$0-\$1,000	\$80.00 (base fee)
\$1,000+	\$2.00 per additional \$1,000.00
Reinspection	\$50.00
Fire Dept.. Commercial Inspection	\$50.00

TOTAL FEES DUE: \$

COMMENT:
APPROVED BY: _____ PERMIT NUMBER _____ DATE: _____



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