

TOWN OF EAGLEVILLE, TENNESSEE

P.O. Box 68
Eagleville, TN 37060
615-274-2922 · Fax 615-274-2977
www.eaglevilletn.gov

MECHANICAL PERMIT APPLICATION

Job Address: _____

Applicant Name: _____

Applicant is the: Contractor* Homeowner**

*A Special Plumbers License with the City of Eagleville or state of Tennessee is required

**If applicant is the homeowner, he/she must read and sign a Homeowner Affidavit.

Property Owner: _____

Address: _____

City, State, Zip: _____ Phone: _____

Project Information: Existing Commercial Existing Residential

New Commercial New Residential

Type of Work: New Addition/Alteration Repair Change-out

Fuel Source: Electric Gas

Heating Equipment Load: _____ BTU's _____ KW's

HVAC Equipment Tonnage: _____

**Please include a copy of your Manual J calculations or equivalent with this permit application*

Type(s) of Work to be Performed:

Gas Venting Gas Piping Dryer Venting Grease Duct Paint Booth

Furnace Duct Work Fire Damper Boiler Chiller

Condensing Unit Condensate Drain Refrigerant Piping Residential Kitchen Exhaust Hood

Package Unit Gas Fireplace Unit Heater Commercial Kitchen Exhaust Hood

Gas Piping Information: (Please provide the BTU load for all appliances/fixtures.)

Furnace _____ Water Heater _____ Fireplace _____ Cook Stove _____

Package Unit _____ Clothes Dryer _____ Unit Heater _____ Boiler _____

Total Value of Work to be Performed: _____

Applicant Signature: _____

Date: _____

Approval Signature: _____

Date: _____