



HISTORIC  
FRANKLIN  
TENNESSEE

# MECHANICAL PERMIT APPLICATION

**BUILDING and NEIGHBORHOOD SERVICES**  
615-794-7012 Office      615-591-9066 Fax

## GENERAL INFORMATION

Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_ Building Permit #: \_\_\_\_\_  
Project Address: \_\_\_\_\_ Suite/Unit #: \_\_\_\_\_  
Project Name: \_\_\_\_\_ Residential \_\_\_\_\_ Commercial  
Property Owner/General Contractor: \_\_\_\_\_  
Property Owner's/General Contractor's Phone Number: \_\_\_\_\_

## CONTRACTOR INFORMATION

Mechanical Contractor: \_\_\_\_\_  
City Mechanical License #:: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ E-mail: \_\_\_\_\_  
Office phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## CHECK ALL THAT APPLY

\$ \_\_\_\_\_ **CONTRACT AMOUNT (Include Materials and Labor)**

- |                                      |  |                    |
|--------------------------------------|--|--------------------|
| <input type="checkbox"/> Natural Gas | <input type="checkbox"/> Refrigeration | _____ # Tons       |
| <input type="checkbox"/> Electric    | <input type="checkbox"/> Ductwork      | _____ # BTU        |
| <input type="checkbox"/> Oil         | <input type="checkbox"/> Fireplace     | _____ # of Stories |
| <input type="checkbox"/> LPG         | <input type="checkbox"/> Gas line      |                    |

BNS OFFICE USE ONLY	
PERMIT #	_____
FEES \$	_____

*Narrative of Scope of Work*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Note:** Applications can be emailed to [cofpermitapp@franklintn.gov](mailto:cofpermitapp@franklintn.gov). Ladder Access to be provided by contractor to roof areas. Incorrect or incomplete information may result in permit revocation.