

**LEXINGTON-FAYETTE URBAN COUNTY GOVERNMENT**

Department Of Public Safety  
Division Of Building Inspection

Mailing address: 200 East Main Street  
Lexington KY 40507  
Phone: 859-258-3770

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2<sup>nd</sup> Floor  
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# HVAC PERMIT APPLICATION

## MULTI-FAMILY

**HVAC CONSTRUCTION APPLICATION: MULTI- FAMILY DWELLING**

It is expressly understood that the applicant for the permit agrees and states that this installation will be in strict compliance to the Uniform State Building Code and the International Mechanical Code.

**Location:** \_\_\_\_\_  
(Street Address)

**Subdivision:** \_\_\_\_\_

City: Lexington  
County: Fayette

Owner Name: \_\_\_\_\_  
Owner Address: \_\_\_\_\_  
Phone #: \_\_\_\_\_

Engineer's Name \_\_\_\_\_  
Engineer's Phone \_\_\_\_\_  
Engineer's Email \_\_\_\_\_

Contractor: \_\_\_\_\_ Reg. #: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Master #: \_\_\_\_\_  
Insurance: W/C: \_\_\_\_\_ Liab: \_\_\_\_\_

**Check Each Box That Applies:** ☐ New Construction ☐ Replacement # of Units: \_\_\_\_\_ Cost of Project \_\_\_\_\_

First System \$105.00 PLUS ( \_\_\_\_\_ # of additional systems X \$50.00 = \_\_\_\_\_ ) Equals \_\_\_\_\_ Total Permit Cost

This permit will include up to 3 inspections. A \$50 re-inspect permit shall be purchased if further inspections are necessary.

If twelve (12) dwelling units are present, two (2) sets of mechanical plans, stamped by a Kentucky Engineer, will be required.  
(Exceptions are: dormitories or boarding homes where the occupant load is equal or greater than 50.)

Date of Sizing Calculations: \_\_\_\_\_  
Orientation of Structure: \_\_\_\_\_

Design Conditions:  
Winter: 8 Summer: 91

PER APPROVED METHOD	Square Footage	Load Calculations		Unit Location	Fuel Type	Size of Unit (BTU)	
		Heat Gain	Heat Loss			Cool Load	Heat Load
System 1							
System 2							
System 3							
System 4							
System 5							

Total \$ \_\_\_\_\_

☐ Add \$500 fee (Started work prior to permitting)

Paid by: ☐ Cash ☐ Check Ck. # \_\_\_\_\_

**NOTES:**

- ☐ Rough in and final inspection required on all new construction  
☐ Must meet requirements of 2013 Kentucky Building Code  
☐ All work shall have at least one inspection (such as replacement)  
☐ It is your responsibility to call to schedule for the following inspections: ☐ **Rough-In** ☐ **Final** **Inspector:** \_\_\_\_\_
- ☐ Work must be performed by Licensed HVAC Contractor  
☐ Must meet requirements of 2012 International Mechanical Code

The Division of Building Inspection, HVAC section, is issuing this HVAC construction permit upon your request in accordance with KRS 198B.6671 and 815 KAR 8:070. You and/or your agent on your behalf, the undersigned, are fully aware that you are responsible for this installation in its entirety through completion. It is your responsibility to notify, request, and obtain all required inspections. If for any reason you fail to complete this installation, it shall be your responsibility to notify the Department immediately. I verify all information provided is true and accurate to the best of my knowledge.

Master HVAC/Homeowner Signature: \_\_\_\_\_ Approved By: \_\_\_\_\_  
 Submittal Date: \_\_\_\_\_ Approval Date: \_\_\_\_\_