



Ocean Springs Building Department
1014 Porter Avenue
Ocean Springs, MS. 39564
Phone 228-875-6712

Mechanical Permit Application

Residential _____ Commercial _____

Building Permit No. _____ Date _____

Mechanical Contractor _____ Phone _____

Customer _____ Phone _____

Job Address _____

Brand of Equipment _____

___ System ___ Condenser ___ Heat Pump ___ Air Handler

___ Elec Heat ___ Gas Heat ___ Evap Coil ___ Hydro Heat

Tonnage _____ BTU in KW _____ BTU in Gas _____

___ New Construction

___ Replacement of Existing System

___ Replacement of Existing Condenser

___ Replacement of Existing Air Handler/Gas Furnace

___ Replacement if Existing Evaporator Coil

___ Hood System

Job Cost _____

I, the undersigned, make application for permit to install heating and air in the premises described and in accordance with the data given above:

Applicant Signature: _____ **Date** _____

Building Official: _____ **Date** _____

Fire Department: _____ **Date** _____