Sarpy County Planning and Building Department
1210 Golden Gate Drive, #1240
Papillion NE 68046
Phone: 402-593-1555
Fax: 402-593-1558
www.sarpy.com

Business Hours 8 am – 4:45 pm M-F

FOR OFFICE USE ONLY
(Revised 3-4-15)

PERMIT # _____
Fee Collected _____

Zoning District _____ FP_____

MECHANICAL/HVAC PERMIT APPLICATION

☐ One or Two Family Dwelling ☐ Multi-family Building ☐ Commercial/Business

Describe work being done: _____

Address of project_____

Legal Description: _____
(Lot) (Subdivision)

Owner of Property_____
(Name) (Address) (City, State, Zip) (Phone)

*Mechanical Contractor_____
(Name) (Address) (City, State, Zip) (Phone)

Mechanical License Number: _____Issuing Authority: _____

* Only a home owner that resides in dwelling where work is being done is permitted to act as contractor. All other projects require qualified contractor.

Description	*Fee $*	*QTY*	*$ Total*	*Description*	*Fee $*	*QTY*	*$ Total*
New Furnace/Heater (btu/hr)				Absorption/ Evaporative cooling	12.30		
up to 100k Btu/h	17.05			Air handlers (cfm)			
over 100k Btu/h	21.01			up to 10,000 cfm	12.30		
A/C or Heat pump	17.05			over 10,000 cfm	20.90		
Ventilation Fan w/ duct	8.35			Boilers, compressors			
Alteration of ductwork	12.30			Up to 3 hp	16.95		
Wood Burning Fireplace	12.30			Greater than 3 hp and up to 15 hp	31.35		
Heating appliance,	17.05			Greater than 15 hp and up to 30 hp	43.00		
Miscellaneous equipment	12.30			Greater than 30 hp and up to 50 hp	64.00		
Incinerator	16.70			Over 50 hp	107.00		
Refrigeration unit	17.05			Mechanical Issuance Fee	25.00		25.00
Cooling or absorption unit	17.05			*TOTAL MECHANICAL PERMIT FEE*			
Commercial exhaust hood w/ duct	12.30						

I hereby state that that the information submitted on this application is accurate and correct. I recognize that the issuance of this building permit shall not grant approval to violate any of the provisions of the building codes or zoning ordinances enforced by this jurisdiction, state or federal law; and that this permit shall not prevent the building official from requiring construction to be in compliance with all applicable code provisions during field inspections. This permit shall become null and void if no construction work has commenced within 180 from date of issuance or if work has commenced then stopped for more than 180 days. Permits shall expire if construction is not complete within one (1) year of issuance. A ninety (90) day extension may be obtained from the Planning and Building Department by written application. Upon expiration of a permit, a new permit will be required.This building permit is issued for the express purpose of work stated on this application and shown on the approved plans. Any changes to the construction plans that effect area or scope of work shall be approved by the building official's prior to construction and may require another permit application. No permit fee refunds are allowed if work has commenced or if work has not commenced and more than 180 days has elapsed after issuance date.

Applicant Name (Print clearly):_____Signature:_____Date:_____

Contact Name (Print clearly):_____Phone:_____Fax:_____
Person to answer questions regarding construction drawings and other code compliance issues.

Contact Email Address:_____

OFFICIAL USE ONLY Received: _____

Building Plan Review Approved By: _____Date:_____

Zoning Review Approved By: _____ Date:_____