



COUNTY OF RANDOLPH
Department of Building Inspections
204 E Academy St • PO Box 771 • Asheboro, NC 27204-0771
(336) 318-6555

MECHANICAL PERMIT APPLICATION

Date: _____ Job contact name: _____
Parcel number: _____ Job contact phone number: _____
Application number: _____ Job contact e-mail: _____

Owner: _____
Address: _____
City, ST ZIP: _____

LOCATION INFORMATION:

Address of work site: _____

CONTRACTOR INFORMATION:

Contractor: _____
Phone number: _____ License number: _____

HVAC INFORMATION:

Type of Structure: _____
Class of Work: _____
Type of Fuel: _____ Heated Area 1st Floor (sq. ft.): _____
Type of System: _____ Heated Area 2nd Floor (sq. ft.): _____
Gas line: _____ Heated Area 3rd Floor (sq. ft.): _____
Number of HVAC units: _____ Total Heated Area (sq. ft.): _____

**DESCRIPTION
OF WORK/
COMMENTS:**

***** MECHANICAL INSTALLATION SHALL MEET ALL APPLICABLE STATE BUILDING CODES. *****

The undersigned hereby makes application as designated above, and agrees to all applicable laws of Randolph County and the State of North Carolina. The undersigned further states that all statements made hereon are true.

***Fax completed applications to (336) 636-7575 or e-mail to permits@randolphcountync.gov.
We will call you to collect payment information once application is keyed.***

Authorized County Official

Signature of Contractor or Owner