



Village of Village of Walton Hills  
7595 Walton Road • Walton Hills Ohio, 44146  
Kevin Hurst, Mayor, Safety & Economic Development Director

### HVAC PERMIT APPLICATION

Permit # \_\_\_\_\_ Fee: \_\_\_\_\_ Estimated cost: \_\_\_\_\_ Date: \_\_\_\_\_

Address of Installation: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_

Property Owner Address (if different): \_\_\_\_\_ Phone No: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Equipment Information:** Residential \_\_\_\_\_ Commercial \_\_\_\_\_ New Construction \_\_\_\_\_ Remodel \_\_\_\_\_

Type of Appliance: \_\_\_\_\_

Make and Model: \_\_\_\_\_

BTU-Output: \_\_\_\_\_ Duct Work Only: \_\_\_\_\_

#### Contractor Information:

Contractor Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Fax No: \_\_\_\_\_

#### AUTHORIZATION:

The undersigned states that he/she is the owner of the property or authorized agent for the owner of the project address.

1. This permit is granted on condition that all work is done according to the ordinances of the Village of Walton Hills, and all Building Code Laws of the State of Ohio and/or of the Village of Walton Hills and any restrictions. On failure to do so, this permit may be revoked and/or fines and penalties may be imposed.
2. This permit holder or his agent shall notify the Building Division 24 hours in advance for inspection, please call 440-399-0850 to schedule your inspection.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

NOTE: All permits are required to be inspected. It is the responsibility of the contractor or applicant to arrange and schedule all inspections with the property owner and the Building Department. Failure to do so is in violation of Village Ordinance.