HANOVER COUNTY
BUILDING INSPECTOR'S OFFICE
PO BOX 470 (mail)
7516 COUNTY COMPLEX RD. (parcel)
HANOVER, VA 23069
(804) 365-6040

PERMIT #_____

MECHANICAL PERMIT APPLICATION
ELEVATOR

Two sets of plans must be included with permit applications.

OWNER:_____

ADDRESS:_____
STREET CITY STATE ZIP

CONTRACTOR:_____Lic. #_____ Class____

ADDRESS:_____
STREET CITY STATE ZIP

PHONE NUMBER:_____ CONTACT PERSON:_____

DIRECTIONS TO SITE:_____

EQUIPMENT TYPE (electric, hydraulic, etc.)_____

CLASSIFICATION (freight, passenger, etc.)_____

USE CLASS: COMMERCIAL _____ RESIDENTIAL _____ CONSTRUCTION ____

RATED CAPACITY _____(lbs) RATED SPEED _____(ft/mn)

PHASE I EMERGENCY RECALL LOCATION: PRIMARY_____

ALTERNATE_____

EMERGENCY COMMUNICATION SIGNAL PROVIDER_____

TOTAL FLOORS TRAVELED _____ TOTAL FEET TRAVELED_____

HYDRAULIC FLUID COMBUSTIBLE (yes or no) _____

JOB VALUE _____

PERMIT FEE _____

2% SURCHARGE _____
(State Levy)

TOTAL FEES _____

PERMIT FEES (Based on job value, which includes labor and material):

VALUE	FEE	TOTAL (2% added)
UP TO 5000.00	$ 95.00	$ 96.90
$ 5001.00 +	$ 95.00 + ($4.00 for each additional $1000.00 or fraction of $1000.00)	

THIS IS TO CERTIFY THAT THE ESTIMATED COST SET FORTH ON THE REFERENCED PERMIT IS TRUE AND FACTUAL TO THE BEST OF MY KNOWLEDGE AND IT IS DETERMINED BY THE FOLLOWING: ACTUAL COST OF LABOR AND MATERIALS INCLUDING ANY AND ALL FURNISHED BY OTHER THAN THE INSTALLER, SHALL BE INCLUDED IN SUCH COST.

APPLICANT SIGNATURE_____ DATE_____