



301 Iven Avenue
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RADNOR TOWNSHIP Community Development Department Application for Mechanical Permit

Permit No. _____
Fee _____ *
*Include \$4.50 PA Surcharge and \$2.00 Administrative Fee

Job Location:	Address: _____
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Property Owner:	Name: _____
	Address/Zip: _____
	Phone: _____ Fax: _____ Email: _____

Mechanical Contractor:	Name: _____
	Address/Zip: _____
	Phone: _____ Fax: _____ Email: _____

Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Institutional <input type="checkbox"/> New Work <input type="checkbox"/> Alteration <input type="checkbox"/> Other <input type="checkbox"/> _____	Proposed Install Date: _____
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Description of Work _____

HEATING	
Type of Fuel Natural Gas Propane Other _____	Cost of Installation _____
Name of Unit _____	Mfg. By _____
Capacity of Unit (BTU's) Input _____	Output _____

AIR CONDITIONING	
Capacity of Unit (BTU's) Input _____	Cost of Installation _____
Distance from property line _____	
Name of Unit _____	Mfg. By _____

All work, materials and construction to be in accordance with the rules and regulations of the Mechanical Codes of the Township of Radnor. Mechanical inspections require 24 hours notice minimum. Rough inspections required. Final inspections required for ALL permits. PERMITS ARE NOT TRANSFERABLE	
Signature of Applicant _____	Current Radnor Registration No. _____