



**MECHANICAL INFORMATION**

**CONTRACTOR:** \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ (City/State/Zip) \_\_\_\_\_

**Mechanical Bond No:** \_\_\_\_\_ **Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Indicate appliances and gas lines you will be installing or replacing (include count for each type):

Replacement (one fixture, no piping/vent changes)  Addition/Remodel  New Construction

MECHANICAL APPLIANCES

GAS LINES

<u>Quantity</u>	<u>Quantity</u>	<u>Quantity</u>	<u>Quantity</u>
_____ Furnace	_____ Kitchen Fan	_____ Furnace	_____ Dryer
_____ A/C System	_____ Bath Fan	_____ Fireplace	_____ Stove
_____ Air Exchanger	_____ Grill	_____ Unit Heater	_____ _____
_____ Fireplace	_____ Unit Heater	_____ Water Heater	_____ _____
_____ In-Floor Heat	_____ Gas Log	_____ Grill	_____ _____

**PLUMBING INFORMATION**

**CONTRACTOR:** \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ (City/State/Zip) \_\_\_\_\_

**Plumbing License No:** \_\_\_\_\_ **Contact Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Indicate fixtures you will be installing or replacing (include count for each type):

Replacement (one fixture, no piping/vent changes)  Addition/Remodel  New Construction

<u>Quantity</u>	<u>Quantity</u>	<u>Quantity</u>	<u>Quantity</u>
_____ Water Heater	_____ Shower	_____ Laundry Tub	_____ Lawn Sprinkler System
<input type="checkbox"/> Gas <input type="checkbox"/> Electric	_____ Bathtub	_____ Rough-In Future Fixture	_____ Hose Bib
_____ Water Softener	_____ Dishwasher	_____ Sump	_____ _____
_____ Water Closet (Toilet)	_____ Clothes Washer	_____ Water Piping System	_____ _____
_____ Lavatory (Sink)	_____ Ice Maker Line	_____ Floor Drain	_____ _____