



MECHANICAL PERMIT
\$75.00

City Received Date Stamp

PLEASE PRINT/TYPE

Description of Work: _____

Address: _____

Lot: _____ Block: _____ Tract: _____

Owner: _____

Phone Number: _____ Mobile Number: _____

ALL CONTRACTORS *MUST* BE REGISTERED WITH THE CITY OF PARKER

Contractor: _____

Address: _____

Contact Name: _____ Email: _____

Business Phone: _____ Mobile Number: _____ Fax: _____

INSPECTIONS: When entry into the home is required, contact City Hall directly at (972) 442-6811. Otherwise, leave request on inspection line.

THE CITY CURRENTLY FOLLOWS THE 2000 INTERNATIONAL MECHANICAL CODE

NOTICE: THIS PERMIT BECOMES NULL AND VOID IF THE WORK/CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS OR IF THE WORK/CONSTRUCTION IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER COMMENCED. I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF THE LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK/CONSTRUCTION WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY STATE OR LOCAL LAW REGULATING WORK/CONSTRUCTION OR THE PERFORMANCE OF WORK/CONSTRUCTION.

SIGNATURE OF OWNER OR CONTRACTOR

DATE

For City Use Only:

Fee Paid \$ _____ Cash ☐ Check ☐ # _____ CC ☐ Received by _____

City Registration Expiration Date: _____