



Community Development and Neighborhood Services  
 281 N College buildingservices@fcgov.com  
 Fort Collins, CO 80524 970-416-2740

**WATER HEATER & HVAC PERMIT APPLICATION**

Application # \_\_\_\_\_  
 Date Received \_\_\_\_\_

**ALL information is REQUIRED. Incomplete applications will not be accepted.**

Job Site Address

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Property Owner Information

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Scope of Work

- Air Conditioner
- Furnace
- Minisplit
- Boiler
- Water Heater
- Other \_\_\_\_\_

Description	Valuation (per appliance)	New or Replacement?
1.		
2.		
3.		
4.		
5.		
6.		
7.		

**Residential** Furnace and Air Conditioner Sizing

- Equipment is sized and selected Per Manual J and per IRC code amendment capacity limits.

Contractor Information

Name \_\_\_\_\_

Company \_\_\_\_\_

License Holder \_\_\_\_\_ License Number \_\_\_\_\_

Electrical Contractor Information (only required for new installs)

Name \_\_\_\_\_

Company \_\_\_\_\_ License Number ME- \_\_\_\_\_

**COMMERCIAL ONLY**

Rooftop  Yes  No **Note** For new rooftop equipment or replacements that are heavier than original, engineered documentation needs to be provided to show roof can support equipment.

Equipment is same weight or lighter  Yes  No  
 Equipment is in same location  Yes  No  
 Location \_\_\_\_\_

Equipment is same footprint or smaller  Yes  No  
 Equipment is same height or smaller  Yes  No

If for a water heater or boiler in any food or beverage serving facility/Day Care/Institution occupancies, I have approval from the Larimer County Health Department for minimum water heater capacity.  Yes  No

Tenant Name \_\_\_\_\_

**I hereby acknowledge that I have read this application and state that the above information is complete and correct. I agree to comply with all requirements contained herein and city ordinances and state laws regulating building construction. I know that a permit is not valid until it has been paid and issued.**

Print Name	Signature	Date
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