



# City of Winter Park

## Building & Permitting Services Department

401 S. Park Ave., Winter Park FL 32789 [www.cityofwinterpark.org](http://www.cityofwinterpark.org)

Phone: 407-599-3237 Fax: 407-599-3499 Email: [Permits@cityofwinterpark.org](mailto:Permits@cityofwinterpark.org)

### MECHANICAL PERMIT APPLICATION

PERMIT # \_\_\_\_\_  Stand-alone  Sub permit

DATE REC'D: \_\_\_\_\_ PROJECT VALUATION \$ \_\_\_\_\_

PROJECT NAME \_\_\_\_\_

PROJECT ADDRESS \_\_\_\_\_ SUITE/UNIT # \_\_\_\_\_

TAX / PARCEL I.D. NUMBER \_\_\_\_\_ CITY LOCATION ID # \_\_\_\_\_

OCCUPANT NAME \_\_\_\_\_

PROPERTY OWNER \_\_\_\_\_ PHONE \_\_\_\_\_

PROPERTY OWNER'S ADDRESS \_\_\_\_\_

MECH. CONTRACTOR NAME \_\_\_\_\_ PHONE \_\_\_\_\_

MECH. CONTRACTOR'S ADDRESS \_\_\_\_\_

CONTRACTOR ST.REG./CERT.# \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_ PHONE/FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

Please indicate the nature of work by completing the information below:

1. Air conditioning: No. of Units \_\_\_\_\_ Tons Per Unit \_\_\_\_\_ Total Tons \_\_\_\_\_ Estimated Cost \$ \_\_\_\_\_  
Type of System: Water to Air \_\_\_\_\_ Chiller \_\_\_\_\_ Split System \_\_\_\_\_ Package \_\_\_\_\_ Heat Pump \_\_\_\_\_
2. Heating: No. of Units \_\_\_\_\_ KWS per unit \_\_\_\_\_ Total KWS \_\_\_\_\_ BTU's \_\_\_\_\_ Estimated Cost \$ \_\_\_\_\_
3. Ventilation: (number of) Grease \_\_\_\_\_ (or) Heat \_\_\_\_\_, Hoods, Air Intakes \_\_\_\_\_ Estimated Cost \$ \_\_\_\_\_  
Exhaust Fans \_\_\_\_\_ Dryer Vents \_\_\_\_\_
4. Refrigeration: Number of units \_\_\_\_\_ Estimated Cost \$ \_\_\_\_\_
5. Piping: Air \_\_\_\_\_ Vacuum \_\_\_\_\_ Steam \_\_\_\_\_ Chill Water \_\_\_\_\_ Estimated Cost \$ \_\_\_\_\_
6. Others..... (Specify) \_\_\_\_\_ Estimated Cost \$ \_\_\_\_\_
7. Was space previously Air Conditioned? Yes \_\_\_\_\_ No \_\_\_\_\_
8. Comments \_\_\_\_\_

#### Sec. 58-71(i)(2). General provisions for residential zoning districts

Air-conditioning equipment shall not be located in any front yard or side yard with street frontage unless totally shielded from view from the street by shrubbery or walls and fences otherwise complying with the zoning code. Air-conditioning equipment may be located up to ten feet from a rear lot line as long as they are adjacent to the accessory structure or principal structure. Air-conditioning compressors and electric generators shall not be located in any side yard or within ten feet from the rear lot line except that they may be permitted six feet from a side or rear property line if written permission is granted by the adjacent property owner. In addition, for lots over 75 feet in width, air-conditioning compressors and electric generators may be located ten feet from the side lot line. Any air-conditioning equipment placed on a roof must be screened from view from surrounding properties and from public streets.

INITIAL FOR ACKNOWLEDGEMENT OF THE FOLLOWING PROVISION \_\_\_\_\_

**WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.**

**NOTARIZED OWNER SIGNATURE REQUIRED ONLY IF THIS WORK IS NOT PART OF A PROJECT WITH AN ISSUED BUILDING PERMIT.**

Signature

\_\_\_\_\_  
Owner or Agent (including contractor)

The foregoing instrument was acknowledged before me the

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ by \_\_\_\_\_ who is personally known to me and who produced \_\_\_\_\_

\_\_\_\_\_ as identification and who did not take an oath.

**Notary as to Owner**

\_\_\_\_\_

Commission No.

\_\_\_\_\_

State of FL. County of

\_\_\_\_\_

My Commission expires:

\_\_\_\_\_

(SEAL)

Signature

\_\_\_\_\_  
Contractor

The foregoing instrument was acknowledged before me the

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ by \_\_\_\_\_ who is personally known to me and who produced \_\_\_\_\_

\_\_\_\_\_ as identification and who did not take an oath.

**Notary as to Contractor**

\_\_\_\_\_

Commission No.

\_\_\_\_\_

State of FL. County of

\_\_\_\_\_

My Commission expires:

\_\_\_\_\_

(SEAL)

**Pursuant to Florida State Statute 713.135(7) – All signatures must be notarized.**