



# Mechanical Permit Application

Application for permit to install air conditioning-refrigeration heating or duct work

101 East Main St.  
 Robstown, Texas 78380  
 Phone (361) 387-4589 Opt.5

Building Inspection Department  
 P.O. Box 892  
 Robstown, Texas 78380  
 Email: qc\_hub@cityofrobstown.com

Date \_\_\_\_\_  
 (Check One)  Residential  Commercial (Check one)  New Bldg.  Existing Bldg.  
 Owner of Property \_\_\_\_\_ Address \_\_\_\_\_  
 Phone \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_

Scope of work: (required):

Name of Business \_\_\_\_\_  
 Mechanical Contractor \_\_\_\_\_ Phone \_\_\_\_\_  
 State Contractor License # \_\_\_\_\_ exp date: \_\_\_\_\_

	Minimum Permit Fee	\$9.00	\$9.00
_____ Sq. ft	New Construction of 1 and 2- family and multifamily residence.	Three Cents (\$0.03) / sq. ft living area (Min. \$25.00)	\$ _____
_____ Sq. ft	Existing Dwelling – new installation	Four Cents (\$0.04) /sq. ft living Area (Min. \$25.00)	\$ _____
\$ _____	All other new commercial construction	\$30.00 plus \$2.00/\$10.00	\$ _____
_____	Repairs, alterations, and additions to an existing system (Residential or Commercial)	\$7.00	\$ _____
_____	Re-Inspection Fee	\$9.00	\$ _____
Total Fee			\$ _____

This application becomes a permit when accepted and signed by the inspector. Applicant hereby agrees that all air conditioning- refrigeration's, heating or duct work installed under this permit shall comply with the latest codes as adopted by The City of Robstown. I hereby accept all conditions herein above mentioned and certify the quantities and statements by me are true and correct.  
**Roof top unit replacements for commercial buildings are required to have a WPI-1 submitted with application**  
**Type 1 or 2 hoods require shop drawings. Intake-1 day review**

FINAL INSPECTION REQUIRED TO CLOSE PERMIT

License Holder/Owner Signature \_\_\_\_\_ Date \_\_\_\_\_  
 License Holder/Owner Print Name \_\_\_\_\_ Date \_\_\_\_\_  
 Inspector \_\_\_\_\_ Date \_\_\_\_\_