careers
businesses
neighborhoods

EQUIPMENT USE PERMIT / APPROVAL

Location:_____ Borough: _____

Permit/Notice No.:_____ Plan No.: _____

This permit / approval is issued for the use and operation of roof mounted HVAC units as listed below:

#	MAKE	MODEL	CAPACITY BTU/Hour	BSA/MEA#
__	_____	_____	_____	_____
__	_____	_____	_____	_____
__	_____	_____	_____	_____
__	_____	_____	_____	_____

This EQUIPMENT USE PERMIT / APPROVAL is issued in accordance with Section 27-187 of the Administrative Code and this approval is based on the details submitted and approved under the above references Permit / Notice number

_____

Name of Professional Engineer / Registered Architect Seal and Date

_____

Address

_____

Director/ Plan Examiner Date