



CITY OF BROOK PARK – BUILDING DEPARTMENT  
5590 Smith Road | Brook Park | Ohio | 44142  
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www.cityofbrookpark.com/building-department

ALL REQUESTS **MUST** BE MADE USING OUR CURRENT / APPROPRIATE CALENDAR YEAR FORMS  
We do not "HOLD" documents, **INCORRECT and/or INCOMPLETE REQUESTS WILL BE RETURNED**

Our office does **NOT** accept payments online

Payments accepted via: *Exact Cash, Check / Money Order (Payable to: City of Brook Park), Visa, Mastercard, Discover*

**Work CANNOT begin until an approved permit is on site.** Allow 3-5 days processing of non-structural requests, 3-30 days for New Construction/Additions/Alterations. A minimum 24 Hour Notice is required to schedule for first available inspection

## 2025 HVAC PERMIT APPLICATION – Page 1 of 2

Anticipated date WORK WILL BEGIN: \_\_\_\_\_ PROJECT VALUATION: \$ \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_  Residential  Commercial

Property Owner Names(s): \_\_\_\_\_ Phone #: \_\_\_\_\_

Request Permit be returned via:  E-Mail: \_\_\_\_\_  
 Mail (*Include STAMPED, self-addressed envelope*)

### WORK WILL BE COMPLETED BY THE:

**PROPERTY OWNER:** I hereby certify \_\_\_\_\_ (INITIALS), as the property owner that *I personally will perform the work* described on the permit application *in lieu of securing the services of a registered professional* to complete the work, as provided for by the provisions of Section 1311.02 of the Codified Ordinances of the City of Brook Park, Ohio. I understand, that as the permit holder, it is my responsibility to: •Obtain all required Permits and Approvals •Comply with all applicable Building Codes, Zoning Codes and other Specifications •Obtain all required Inspections •Assume responsibility for correcting any deficiencies detected during inspection(s). I further understand that any misrepresentations or falsifications on a Permit Application may cause a suspension or revocation of *any* Permit issued, as provided in the Section 1311.07 of the City of Brook Park Building Code, and may be subject to the penalties provided in Section 1311.99

**REGISTERED CONTRACTOR (Business Name)** \_\_\_\_\_  
Project Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

*The undersigned states that he/she is the owner of the property or authorized agent contracted by the owner of the property. This permit will be granted on condition that all work done will be in accordance with the City of Brook Park Ordinances and all Building Code Laws of the State of Ohio. Failure to comply will result in revocation of this permit and additional fines/penalties may be imposed*

**APPLICANT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

THIS IS A 2 PAGE APPLICATION, BOTH PAGES MUST BE COMPLETED & RETURNED (*Page 1 of 2 – Continue to next page*)

**FOR OFFICE USE ONLY BELOW THIS LINE:**



PROJECT ADDRESS: \_\_\_\_\_ Date: \_\_\_\_\_

Did this project require approval from the Board of Zoning Appeals or Planning Commission?  No  Yes, Date: \_\_\_\_\_

SELECT ANY / ALL THAT APPLY TO THE PROJECT & PROVIDE DETAILS - Building, Electric, Plumb work must be submitted separately on appropriate Application

## 2025 HVAC PERMIT APPLICATION – Page 2 of 2

Alteration / Repair  New Construction  Fire Restoration  Other: \_\_\_\_\_

Gross Floor Area: \_\_\_\_\_ (Commercial Projects Only)

AIR CONDITIONING SYSTEM(S) - # of Units: \_\_\_\_\_ (Provide details below)

Unit Size: _____	Unit Location: _____	<input type="checkbox"/> Existing	<input type="checkbox"/> New
Unit Size: _____	Unit Location: _____	<input type="checkbox"/> Existing	<input type="checkbox"/> New
Unit Size: _____	Unit Location: _____	<input type="checkbox"/> Existing	<input type="checkbox"/> New
Unit Size: _____	Unit Location: _____	<input type="checkbox"/> Existing	<input type="checkbox"/> New

FURNACE / BOILER SYSTEM(S)

Unit Size: _____	Unit Location: _____	<input type="checkbox"/> Existing	<input type="checkbox"/> New
Unit Size: _____	Unit Location: _____	<input type="checkbox"/> Existing	<input type="checkbox"/> New
Unit Size: _____	Unit Location: _____	<input type="checkbox"/> Existing	<input type="checkbox"/> New
Unit Size: _____	Unit Location: _____	<input type="checkbox"/> Existing	<input type="checkbox"/> New

SUPPLEMENTAL SYSTEM(S)

Unit: _____	Location: _____	<input type="checkbox"/> Existing	<input type="checkbox"/> New
Unit: _____	Location: _____	<input type="checkbox"/> Existing	<input type="checkbox"/> New

OTHER - \_\_\_\_\_

- Continue Additional Units/Details on Back of Application -

PROJECT DESCRIPTION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

( Continue on Back of Application )