



CITY OF NORTHMOOR

4907 NW WAUKOMIS DRIVE NORTHMOOR, MISSOURI 64151
PHONE: 816-741-6071 FAX 816-587-5129 Email clerk@northmoormo.gov

MECHANICAL / HVAC PERMIT APPLICATION

\$100.00 Fee

- ❖ CERTIFICATE OF LIABILITY INSURANCE NAMING THE CITY OF NORTHMOOR AS CERTIFICATE HOLDER PROVIDED BY: ☐ ARCHITECT ☐ ENGINEER ☐ GENERAL CONTRACTOR ☐ ELECTRICAL CONTRACTOR ☐ MASTER ELECTRICIAN ☐ MASTER PLUMBER
- ❖ NO TAX DUE STATEMENT FROM THE STATE OF MISSOURI PROVIDED BY: ☐ ARCHITECT ☐ ENGINEER ☐ GENERAL CONTRACTOR ☐ ELECTRICAL CONTRACTOR ☐ MASTER ELECTRICIAN ☐ MASTER PLUMBER
- ❖ COPY OF CERTIFICATION NUMBER PROVIDED BY THE STATE: ☐ MASTER ELECTRICIAN ☐ MASTER PLUMBER

☐ NEW CONSTRUCTION ☐ ADDITION ☐ REMODEL ☐ REPAIRS ☐ SOLAR ☐ OTHER

CONTACT INFORMATION

DATE _____ EXPIRES _____ PERMIT # _____

COMPANY NAME _____ CONTACT NAME _____

ADDRESS _____

CITY, STATE AND ZIP CODE _____

PHONE NUMBER _____ CELL _____

E-MAIL _____

DEVELOPER _____

OWNER _____

ARCHITECT _____

ENGINEER _____

GENERAL CONTRACTOR _____

ELECTRICAL CONTRACTOR _____

MASTER ELECTRICIAN _____

MASTER PLUMBER _____

STATE/CONTRACTOR LICENSE #: _____

SERVICE INFORMATION

PROJECT NAME _____

PROJECT ADDRESS _____

CITY, STATE, ZIP CODE _____

DATE TEMPORARY SERVICE REQUIRED _____

DATE PERMANENT SERVICE REQUIRED _____

PROJECT SIZE _____(sq. ft)

CONNECTED LOAD

	EXISTING	NEW
Air Conditioning	_____ kW	_____ kW #of Units_____ Ttl. Tonnage_____
Miscellaneous	_____ kW	_____ kW Equipment_____
Motors	_____ kW	_____ kW Largest Motor_____ HP/Use_____
Other	_____ kW	_____ kW _____
Total Connected	_____ kW	_____ kW Est. Diversified Demand_____ kW _____

MISCELLANEOUS INFORMATION

Please give a description of your project: _____

COMPLETED BY _____ DATE _____

COMPANY _____ PHONE _____