OF FAIRB					PROJECT NAME/NUMBE	R:	
ALASKA		TY OF FAIRBAN AL PERMIT API		ATION	OFFICE USE ONLY		
APPLICANT TO COMPLETE	E NUMBERED SPACES ONLY	PLEASE PRINT			E U		
1. DATE	2. JOB ADD	RESS			DFFIC		
<b>3.</b> LEGAL DESCRIPTION	PAN # LOT NO.	BLK SUBDIVISION	,	4. JOB NAME	0		
5. APPLICANT	MAIL ADDRESS	CITY/STATE/ZIP	PHONE	FAX	EMAIL		
6. OWNER	MAIL ADDRESS	CITY/STATE/ZIP	PHONE	FAX	EMAIL		
7. CONTRACTOR	MAIL ADDRESS	CITY/STATE/ZIP	PHONE	FAX	EMAIL		
8. MECHANICAL ADMINISTRATOR				LICENSE NUMBER			
9. FUEL	FUEL OIL 🔲 NATU	RAL GAS 🗌 PROPANE	<b>13.</b> QTY	EQUIPMENT DESCRI	PTION TO INSTALL	FEE (OFFICE)	
	FERATION 🗌 REPLA	CEMENT D ADDITION					
11. USE OF STRUC							
<b>12.</b> DESCRIBE WC	JRK:						
					FION OVETEME OF		
CONDITIONS (OFFICE)			REFRIGERATION SYSTEMS OF LESS/MORE THAN 55LB-CHARGE				
				TYP	E I HOOD SYSTEM		
			TYPE II OR OTHER HOOD SYSTEM				
				SQ.FT. MECH VENT/HEAT SPACE - NO A/C			
				VENT/HEAT	SQ.FT. MECH SPACE - WITH A/C		
NOTICE				SQ.FT.			
I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will				HYDRONICALLY-HEATED SPACE			
be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.			OUTLET SYSTEM CONVERSION TO FUEL NOTED				
					LET GAS SYSTEM		
PRINT NAME		DATE	APPROVE	ED FOR ISSUE BY:	SUBTO	DTAL	
rkini name DATE		DATE:		PLAN CHECH	FEE		
				PERMIT	FEE		
SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT DATE					TOTAL FEE		
CITY OF FAIRBAN	NKS BUILDING DEPART			AIRBANKS AK 99701 .fairbanksalaska.us	PHONE 459-0	5720 FAX 459-6719	