



Permit No.: _____

City of Rosenberg HVAC PERMIT APPLICATION

2220 4th Street, Rosenberg, Texas 77471
Telephone: 832-595-3500 Fax: 832-595-3501
www.rosenbergtx.gov

Inspection Request Line: 832-595-3401; Before 5:30 pm will be scheduled next business day, after 5:30pm will be two business days

Project Address: _____

Customer(s): _____ Phone: _____

Contractor Information*: ***Must be registered with the City of Rosenberg**

Company Name: _____ License No.: _____

Primary Contact(s): _____

Address: _____ City: _____ State/Zip: _____

Office Phone #: _____ Fax#: _____ Cell#: _____

Type of Work:

- Residential Commercial
- New Replacement Alteration/Repair

Description of Work: _____

- Heating System
 - Gas – BTU _____ Electric – KW _____
- Unit Heater (Suspended Heaters, Wall Heaters) BTU _____
- Air Conditioning System Electric – Ampere _____
- Refrigeration Systems BTU _____
- Heat & A/C Combo Systems BTU _____
- Vent Hood Systems Coolers Broilers BTU _____ HP _____

****PROJECT VALUATION:** _____

Permit Issuance Base Fee	10.00
\$10.00 for the first \$1,000	+10.00
Balance of value divided by \$1,000 =	
(Rounded up to the nearest whole number)	+
x \$2.00	_____

TOTAL PERMIT FEE \$ _____

Contractor Signature

Date

Under no circumstances will paid fees be refunded or transferred.
A Penalty Fee of 3x's the Permit Fee will be assessed if work *begins before* the issuance of a valid permit.