Inspection Services Director
Thomas J. Waters, CBO, CFM

Chief Building Inspector
Don Marshall

Chief Mechanical/Energy Inspector
Jeremy Williams

Deputy Inspection Services Director
Kenneth B. Williams

Chief Electrical Inspector
Todd Jordan

Lead Plumbing Inspector
Tyler Dixon

MOBILE COUNTY PUBLIC WORKS

R. Neal Howard, P.E.
Public Works Director

MOBILE COUNTY BUILDING INSPECTIONS

MECHANICAL PERMIT REQUEST

PHONE: 251-574-3507 EMAIL: permits@mobilecountyal.gov

Requests received after 4:00 pm will be processed the following business day.

Property Address: _____ **Date:** _____

Type of Structure: _____ Residential _____ Commercial **Owner's Email** : _____

Owner: _____ **Phone:** _____

Mechanical Contractor: _____ **Email Address:** _____

County Bus. License: _____ **AL State Electrical Contractors License:** _____

General Contractor: _____

New Construction ___ Change Out ___ Add-On ___ Duct Extensions ___ Fire Place___ Mobile Home ___

Repairs to System ___ Hood ___ Refrigeration ___

***Fuel Type**: Electric ___ Heat Pump ___ Natural Gas ___ LP Gas ___ Geothermal ___*
***Manufacturer:** _____ ***SEER rating:** #1 ___ #2___ #3___ #4___ **Tonnage or HP** #1___ #2___ #3___ #4___ ***Refrigerant Type** ____ **Gas Heat %** ____ **KW** ____*

1. **A contract or signed estimate on company letterhead as required to issue permit.**
2. **A copy of the recorded deed is required if the address is not valid.**

I attest that I or the company I represent will be performing the work necessary to complete the above Mechanical installation. The work will comply with 2024 IMC, IRC, IBC, 2023 NEC and all other applicable codes. I agree to pay all additional credit card transaction fees charged by the processing company for the permit issuance. I agree to recognize the facsimile signature below to be legal and binding as an original. It shall be the responsibility of the permit holder to explain the permit and inspection process to the customer. Initial request date for inspection shall be requested by the permit holder and contact information for the customer must be provided.

Signature:_____ Phone No.:_____

Printed Name:_____ Company Name: _____