

City of Falls City2307 Barada Street
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fallscitynebraska.org

GENERATOR MECHANICAL PERMIT APPLICATION



Mail Permit:

Pick Up Permit:

Date of Application: _____

Permit Number: _____

Project Information

Project Location: _____

Email: _____ Phone: _____

Owner of above location: _____

Description of Work: _____ Est. Cost \$ _____

Contractor Information

Contractors Name: _____

Contractors Address: _____ City: _____

State: _____ Zip: _____ Phone: _____ E-mail: _____

Project Type

Type of Fuel: _____ Oil _____ Natural Gas _____ LPG

<u>Type of Equipment</u>	<u>Number</u>	<u>Fee</u>
Gas Line \$6.00		
Generator \$12.30 / per		
Issue Fee \$30.00 Commercial / \$15 Residential		
	Total Fee	

Type of Service: New Customer Existing Customer

Total Heated Square Footage: _____ Total Building Square Footage: _____

Gas Pressure: _____ (Specify) Generator Size: _____ (BTU)

Existing equipment: (e.g. furnaces, boilers, roof top units, water heaters, stoves, generators etc.)

Equipment	Quantity	BTU Input/Each	BTU Total
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Future or projected gas load: Equipment	Quantity	BTU Input/Each	BTU Total
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I attest that all information listed on this application is accurate and I agree to comply all applicable codes and regulations of the City of Falls City

(Signature of Applicant)_____
(Date)

Approving City Official Signature: _____ Date: _____