SNELLVILLE
Planning and Development

City of Snellville
Department of Planning and Development
2342 Oak Road, 2nd Floor
Snellville, GA 30078
www.snellville.gov

(770) 985-3513
(770) 985-3514

APPLICATION FOR
HVAC PERMIT

Please Mail, Hand Deliver, or send by Overnight Mail. There is not an Online Portal or Payment System.

TODAY'S DATE _____ PERMIT NUMBER _____

Permit for: _____ New Installation _____ Replacement _____ Repair

Property: _____ Residential _____ Commercial

Street Number (Homeowner) _____ Street Name _____ Homeowner Name _____ Phone Number _____

☐ Verified in the City Limits at https://www.snellville.gov/am-i-city

HVAC Contractor Company Name _____ Business Street Number & Name _____

Contact Name _____ Phone Number _____ City _____ State _____ Zip _____

Cell Phone Number _____ Email Address _____

In precise detail explain scope of work: Commercial permits may require plans to be submitted.

Fees: Minimum Permit Fee $50.00 per Inspection (each

Number of Units:_____ Number of Inspections:_____ Total Fee(s) Due:_____
Payment is only accepted in person, or by regular or overnight mail. There is not an online portal available.

I understand that the City of Snellville requires plans on commercial buildings using other than residential heating and cooling equipment only. A permit shall be secured from the Department of Planning and Development prior to the commencement of any tear-out or heating, ventilating, or air conditioning work. Upon job completion, please call the Department of Planning and Development (770-985-3513) to arrange for a next-day inspection by the City Building Inspector. I certify that all the above statements are true and that all work performed shall meet National, State, and Local code requirements. Fire Safety must be always maintained. Paid permit application shall serve as City of Snellville Heating & Air Conditioning Permit.

ATTACH A CURRENT COPY OF YOUR OCCUPATION TAX/BUSINESS LICENSE, PROFESSIONAL AND DRIVER'S LICENSES. MAIL OR HAND DELIVER. THERE IS NOT AN ONLINE PORTAL.

_____ _____ _____
Contractor Print Name Signature Date

Rev. 10.20.26