



M.E.P. WORKSHEET

(Please print clearly)

| Project Information | | Applicant Information | |
|---|--|--------------------------|---------------------|
| Project Address: | | Applicant Name: | |
| Lot - Block - Subdivision or Legal Tract: | | Applicant Address: | |
| Project Includes New or Altered Installations for each Trade Checked: | | City / State / Zip Code: | Business Phone No.: |
| <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical | | | |

| Mechanical Information | Electrical Information | Plumbing Information |
|---|---|---|
| (Provide Unit Totals for each category) | (Provide Unit Totals for each category) | (Provide Unit Totals for each category) |
| Furnaces/Air Handlers _____ | New Living (Conditioned) Area _____ | Sinks and Lavs _____ |
| Compressors/Air Conditioners _____ | NEW SF RESIDENTIAL PERMITS | Tubs and Showers _____ |
| Bath Exhaust Fans _____ | DO NOT NEED TO COMPLETE BELOW | Building Sewer _____ |
| Utility Room Exhaust Fan _____ | Temporary Pole _____ | Private Sewage System _____ |
| Kitchen Exhaust Hood/Fan _____ | Receptacles _____ | Water Distribution System _____ |
| Miscellaneous HVAC Installation _____ | Switches _____ | Gas Water Heaters _____ |
| | Light Fixtures _____ | Gas Furnaces _____ |
| | Electric Appliances _____ | Gas Cooking Appliances _____ |
| | Power Apparatus _____ | Gas Fireplaces _____ |
| | Service Panel 200 Amps or Less _____ | Gas Coach Lights _____ |
| | Service Panel >200 Amps _____ | Miscellaneous Installation _____ |
| | Miscellaneous Elect. Installation _____ | |
| Mechanical Contractor _____ | Electrical Contractor _____ | Plumbing Contractor _____ |

I hereby certify that the foregoing information is correct to the best of my knowledge and that said work will be performed in accordance with information contained herein and in compliance with the applicable building codes and ordinances adopted by the City of Colleyville.

Your name: (Please print) _____ Signature: _____

| Office Use Only | | Fees |
|-----------------|-----------------------|---------------------|
| Permit Number: | Mechanical Permit Fee | Plumbing Permit Fee |
| Date: | Electric Permit Fee | TOTAL MEP FEE |