CITY OF PITTSBURGH

Bureau of Building Inspection

200 Ross Street - Third Floor, Pittsburgh, PA 15219
412-255-2175 412-255-2974 (fax)

APPLICATION FOR HVAC CONTRACTOR REGISTRATION

HVAC License Holder Information
Name:_____ Phone:_____
Address:_____
City: _____ State:_____ Zip:_____

HVAC Business Information (If Applicable)
Business Name:_____ Phone:_____
Business Address:_____
City: _____ State:_____ Zip:_____

Are you 18 years old, or older? ☐ Yes ☐ No

Are you able to read and speak English? ☐ Yes ☐ No

Please attach copy of International Code Council's (ICC) Certification for Pennsylvania Standard Master Mechanical Exam - #670 (Pittsburgh).

Please attach Certificate of Insurance showing Contractor's General Liability Insurance in the amount of $300,000.

Please attach letter from Department of Finance letter certifying City Tax ID number.

Please explain practical experience (4 year minimum required):
_____
_____
_____
_____
_____
_____
_____
_____

Please Sign Here:_____

Signature will remain on file and be used to validate future permit applications and license renewals.