CITY OF TUCSON APA PERMIT REQUEST

Fax to 520-791-4475

COTDSDPERMITS@tucsonaz.gov

Complete all blanks, write legibly, do not abbreviate.

Date of request: _____ **Company Name:**_____

Authorized by: _____ **Phone No.:** _____**Fax No.:** _____

APA Account #: _____ **Project Address:**_____**Unit #**_____

COMMERCIAL PROPERTY _____ **RESIDENTIAL PROPERTY** _____

Activity Number: _____ **(DSD Office Use ONLY)**

HEATING AND COOLING UNITS	**Roof top work?**	**YES**	**NO**	**(circle one)**

_____ Gas Furnace _____ #BTUH _____Replace _____New

_____ Heat Pump _____ #KW _____ #Tons ____ New _____Replace (what)_____

_____ Gas Pack _____#BTUH ____#Tons ____New _____Replace (what)_____

_____ Split System/Gas _____#BTUH ____#Tons ____New _____ Replace (what)_____

_____ Split System/Elec _____#KW _____#Tons ____New _____ Replace (what)_____

_____A/C Replacement _____ No. Units _____No. HP Replace (what)_____

_____Furnace Replacement _____No. Units _____No. BTU Replace (what)_____

_____Water Softener _____No. Units _____Replace _____Install

_____Replace Water Heater _____ No. Units Interior? Y or N

_____Electrical Upgrade From _____(amps) up to_____ amps **(200 amps MAXIMUM allowed)**

_____ Electrical Reconnect _____ Commercial _____Residential

_____Add Circuits _____ No. Circuits **(maximum of 2 allowed)**

_____Repair/Replace Gas line _____ no. Outlets _____No. Feet (template required)

_____Gas Reconnection _____ No. Outlets _____Commercial _____ Residential

_____Replace yard water line _____ No. Feet

_____Replace interior water lines _____No. Feet _____No. Fixtures

- **Important Change** Effective 8/1/16 All APA requests are a 24 to 48 hour turn around. Requests with a Mechanical or Plumbing Template will be processed within 2 to 3 business days after the day the request was received.