



MECHANICAL PERMIT APPLICATION	DEPARTMENT USE ONLY	
	Permit #:	
	By:	Date:

This permit is issued under OAR 918-440-0050. Permits expire if work is not started within 180 days of issuance or if work is suspended for 180 days.

CONSTRUCTION CATEGORY
<input type="checkbox"/> Single Family Dwelling <input type="checkbox"/> Mfd Dwelling <input type="checkbox"/> Res Accessory Structure <input type="checkbox"/> Duplex <input type="checkbox"/> Townhome <input type="checkbox"/> Commercial/Industrial <input type="checkbox"/> Multifamily <input type="checkbox"/> Mixed Use
TYPE OF WORK
<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Other <input type="checkbox"/> Replacement <input type="checkbox"/> Tenant Improv.
JOB SITE INFORMATION & LOCATION
Job site address:
City/State/ZIP:
Project Name:
Parcel #:
Directions to job site:
DESCRIPTION OF WORK
Job # (optional):
PROPERTY OWNER INSTALLATION
Name:
Address:
City/State/ZIP:
Phone:
Email:
<input type="checkbox"/> Owner acknowledges installation is being made on residential or farm property owned by me or a member of my immediate family. This property is not intended for sale, exchange, lease, or rent. ORS 479-540(1) and 479.560(1).
Signature: _____
CONTRACTOR INSTALLATION
Business name:
Address:
City/State/ZIP:
Phone:
Email:
Contractor CCB license #:
BCD license #:
Applicant Signature: _____

MECHANICAL FEE SCHEDULE			
<i>Commercial based on valuation – see table on reverse</i>			
APPLIANCE	PER EA	QTY	TOTAL
Heating/Cooling			
Air conditioner	\$16.40		
Air handling unit of up to 10K cfm	\$16.40		
Air handling unit 10,001K cfm and over	\$28.75		
Evaporative cooler other than portable	\$20.10		
Furnace up to 100k BTU	\$27.60		
Furnace greater than 100k BTU	\$33.90		
Furnace/burner w/ ductwork/vent/liner	\$27.60		
Heat pump	\$20.10		
Mini split system - Additional heat source: _____	\$20.10		
Suspended heater, recessed wall or floor mounted	\$27.60		
Hydronic hot water system	\$27.60		
Other Fuel Appliances			
Barbecue	\$27.60		
Chimney/liner/flue/vent	\$27.60		
Decorative gas fireplace	\$27.60		
Gas or wood fireplace/insert	\$27.60		
Oil tank/gas/diesel generator	\$27.60		
Pool or spa heater, kiln	\$27.60		
Water heater	\$14.95		
Wood/pellet stove	\$27.60		
Environmental Exhaust and Ventilation			
Attic/crawl space fans	\$14.95		
Clothes dryer exhaust	\$14.94		
Ductwork – no appliance/fixture	\$14.95		
Floor furnace including vent	\$27.60		
Range hood/other kitchen equipment	\$20.10		
Ventilation fan connected to single duct	\$14.95		
Ventilation system, not a portion of HVAC	\$14.95		
Fuel piping			
Gas fuel piping outlets - first 4 outlets	\$54.05		
Miscellaneous fees			
Additional gas outlets (above 4 outlets)	\$2.00 each		
High Pressure gas piping	\$67.85		
Other heat/cool/vent/fuel, not listed	\$27.60		
Repair/alter/add to mechanical	\$20.10		
Domestic incinerator – install/relocate	\$27.60		
Subtotal: (add up ALL fees) – minimum fee \$ 80.00			
12% surcharge (.12 x subtotal)			
Seismic review – permit fee x 0.01			
Investigative fee – actual cost			
Plan review, if req – % of subtotal			
GRAND TOTAL (Com/Res fees + surcharges)			

Commercial Mechanical	
Valuation of Install	\$
\$1.00 to \$ 5,000.00	\$ \$100.00
\$ 5001 to \$10,000	\$150 for the first \$ 5000 plus \$10 for ea addtl \$1000 to and including \$10000
\$10,001to \$100,000	\$150 for the first 10,000 plus \$9.00 for ea addtl \$1,000 to and including \$100,000
\$100,001and above	\$960 for the first \$100,000 plus \$ 8.00 for ea addtl \$1,000 and fraction there of
Calculated Amount	<i>(Add to Subtotal on front of application)</i>

*** Minimum permit fee of \$125

Commercial Plan Review Requirements

Plan Review – Job Involving (if yes to any, plan review required):

Yes / No

- New commercial building - other than warehouses, storage buildings, and those buildings where all tenant spaces are less than 2000 ft² in area.
- Equipment weighing over 400 lbs installed on roofs (except when replaced with a similar unit).
- Type I hood.
- Spray booth.
- Change of occupancy or use when the building or tenant space is over 4000 sf² in area (except warehouses & storage buildings).
- Work in a hospital, clinic or medical lab.

Two sets of plans must be submitted and plans review fees paid if you answered yes to any of the above questions.