## MECHANICAL Permit Application

## **Malheur County Building Department**

14 South 3rd St. / P.O. Box 2783 Nyssa, OR. 97913

Phone: 541-372-5460 Fax 541-372-5465

DEPARTMENT USE ONLY Date App Rec'd



Email: BuildingDepartment@bldgmalheurco.org

This permit is issued under OAR 918-440-0050. Permits are nontransferable. Permits expire if work is not commenced with 180 days of issuance or if work is suspended for 180 days.

TYPE OF WORK (Check Box)	*** Provide copy of contract / bid with this application  Permit and plan review fees are based on valuation of all work performed, in accordance with Structural Fee Schedule. Indicate the value of All mechanical, materials, equipment, labor, overhead and profit for the mechanical project.  MECHANICAL PROJECT VALUATION \$  RESIDENTIAL FEE SCHEDULE	
New Const Addition/Alteration/Replacement Other		
CATEGORY OF CONSTRUCTION (Check Box)		
1 & 2 Family Dwelling Commercial / Industrial		
Accessory Building Multi-Family		
JOBSITE INFORMATION AND LOCATION		
Jobsite Address:		Oty. Cost Ea Total Cost
Ste/Apt/SP#: City: OR. Zip:	FOR EACH FURNACE / BURN	
Job site Business Name/ Tenant:	Up to 100,000 BTU	\$18.00
Cross St & Directions to Jobsite:	Over 100,000 BTU	\$22.00
orono or a production to sociolo.	HEAT PUMP OR A/C EACH	
	Up to 3 Ton/HP 100MBH	\$18.00
DETAIL OF DESCRIPTION OF WORK	Up to 15 Ton/HP/500/MBH	\$30.00
DETAILED DESCRIPTION OF WORK	AHU Up to 10,000 CFM	\$12.00
□ Natural Gas □ Liquid Propane □ Electric □ Wood	UNIT HEATERS Susp, Wall, Floor Mount	\$18.00
Details:	EVAPORATIVE COOLER (Non Potable)	\$12.00
	WOOD/PELLET/GAS/LPG Stoves/Firepl	\$12.00
	FLUE VENT FOR Wood/Pellet/Gas Stoves	\$8.00
PROPERTY OWNER INFORMATION	ALTER/ADD OF EXISTING SYSTEM	\$15.00
Print Name:	REPAIR/ALTER/ADD OF EQUIPMENT	\$15.00
Mailing Address:	GAS/LPG APPLIANCE-Range, Oven, Dryer	\$12.00
	HOOD - Residential kitchen duct/vent	\$12.00
	APPLIANCE VENTS Dryer / Water Heater	\$8.00
Phone: Cell: This installation is being made on residential property owned by me. This property is	SINGLE DUCT EXHAUST VENT	
not intended for sale, exchange, lease or rent. OAR 918-695-020.	Bathroom/Toilet compart/Utility Rm	\$12.00
Owner Signature:	INTERIOR FUEL/GAS/LPG 1 to 4 outlet  Each additional outlet over 4	\$15.00
Print Name: Date:		\$3.50
CONTRACTOR INFORMATION	EXTERIOR FUEL/GAS/LPG -1st 100'  Each additional 100' or part there of (per 100)	\$30.00
Business Name:		\$30.00
Contact Person:	HYDRONIC HEAT EQUIP (excl boilers) HYDRONIC CIRCUIT LOOPS(per circuit)	\$25.00 \$7.50
	APPLIANCE EQUIPMENT -(Regulated by	\$7.50
Address:	code not classed in categories)	\$25.00
City: ST: Zip:	RE-INSPECTION	\$65.00
Phone: Cell:	SPECIAL INSPECTION(per hour) 1 hr min	\$65.00
Fax: Email:	PERMIT FEE	
CCB Lie# LPG Company Lie #	(A) Enter subtotal of above fees	
LPG Fitter Lic# Fitter Name:	(B) Minimum permit fee IF above	
Authorized	subtotal fee (A) is less thn \$55.00	\$55.00
Signature required:	(C) Investigave fee (equal to (A) if applicable)	
Print Name: Date:	(D) Enter 12% surcharge (.12 x (A) and/or (B)	)
I hereby acknowledge that I have read this application, that the information given is	(E) Plan review fee 65% above(A) if require	
correct, that I am registered with the State Construction Contractor's Board (or that I am exempt under the provisions of ORS 701), that I am the owner or authorized agent of	(F) Fire & life Safety Fee 40% of (A)if requ	
the owner, that the registration No is correct and current, that the plans submitted are in		1100
compliance with state law.	Total Permit Fee Due (A) thru (F)	8,