Malheur County Building Department 316 NE Goodfellow St. Suite 1 DEPARTMENT USE ONLY Ontario, OR 97914 Date App Rec'd Phone: 541-372-5460 Fax 541-372-5465 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) **COMMERCIAL FEES** New Const Addition/Alteration/Replacement *** Provide copy of contract / bid with this application Other Permit and plan review fees are based on valuation of all work performed, in **CATEGORY OF CONSTRUCTION (Check Box)** accordance with Structural Fee Schedule. Indicate the value of All mechanical, ☐ 1 & 2 Family Dwelling Commercial / Induustrial materials, equipment, labor, overhead and profit for the mechanical project. Accessory Building Multi-Family **MECHANICAL PROJECT VALUATION \$** JOBSITE INFORMATION AND LOCATION **RESIDENTIAL FEE SCHEDULE** Jobsite Address: Description Qty.Cost Ea **Total Cost** Ste/Apt/SP#: City: OR. Zip: FOR EACH FURNACE / BURN Up to 100,000 BTU \$18.00 Job site Business Name/ Tenant: Over 100,000 BTU \$22.00 Cross St & Directions to Jobsite: HEAT PUMP OR A/C EACH Up to 3 Ton/HP 100MBH \$18.00 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) \$1.2.00 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 REPAIR/ALTER/ADD OF EOUIPMENT \$15.00 Print Name: GAS/LPG APPLIANCE-Range, Oven, Dryer \$12.00 Mailing Address: HOOD - Residential kitchen duct/vent \$12.00 ST: City: Zip: APPLIANCE VENTS Drver / Water Heater \$8.00 Cell: Phone: SINGLE DUCT EXHAUST VENT This installation is being made on residential property owned by me. This property is Bathroom/Toilet compart/Utility Rm \$12.00 not intended for sale, exchange, lease or rent. OAR 918-695-020. INTERIOR FUEL/GAS/LPG 1 to 4 outlet \$15.00 Owner Signature: Each additional outlet over 4 \$3.50 Print Name: Date: EXTERIOR FUEL/GAS/LPG -1st 100' \$30.00 **CONTRACTOR INFORMATION** Each additional 100' or part there of (per 100) \$30.00 Business Name: HYDRONIC HEAT EQUIP (excl boilers) \$25.00 HYDRONIC CIRCUIT LOOPS(per circuit) Contact Person: \$7.50 APPLIANCE EQUIPMENT -(Regulated by Address: code not classed in categories) \$25.00 ST: City: Zip: **RE-INSPECTION** \$65.00 Phone: Cell: SPECIAL INSPECTION(per hour) 1 hr min \$65.00 Fax: Email: **PERMIT FEES** CCB Lic# LPG Company Lic # (A) Enter subtotal of above fees (B) Minimum permit fee IF above LPG Fitter Lic# Fitter Name: subtotal fee (A) is less thn \$55.00 \$55.00 Authorized Signature required: (C) Investigave fee (equal to (A) if applicable) Date: Print Name: (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 required 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 required the owner, that the registration No is correct and current, that the plans submitted are in compliance with state law. Total Permit Fee Due (A) thru (F)

MECHANICAL Permit Application

