

MECHANICAL PERMIT

APPLICANT/AGENT shall provide the following information: (Please Print)

1. _____
 Job Address Lot/Parcel #

2. _____
 Applicant Address Phone Email

3. _____
 Property Owner (if different) Address Phone Email

4. _____
 Contractor Address Phone Email

Contractor Only: _____ I certify I am registered with the CCB and my registration is in full force.
 CCB# Contractor's Initials

5. Brief Description of Work: New Alteration Repair

COMMERCIAL FEE CALCULATION <i>Commercial permits are based on total valuation to complete the job.</i>	RESIDENTIAL FEE CALCULATION			
	Permit Fee	5% Tech Fee	12% Surcharge	TOTAL
Job Valuation _____				
Permit Fee _____	\$35.00	\$1.75	\$4.20	\$40.95
5% Technology Fee _____	\$10.00	\$0.50	\$1.20	\$11.70
12% Surcharge _____	\$25.00	\$1.25	\$3.00	\$29.25
Fire/Life/Safety Fee _____	\$70.00	\$3.50	\$8.40	\$81.90
TOTAL _____	\$60.00	\$3.00	\$7.20	\$70.20

State surcharge is 12% of applicable fees. Per City of Coos Bay Resolution 17-03, a 5% Technology Fee will be assessed on all permit and plan review fees.

Separate permits are required for Electrical, Plumbing, Heating, Ventilating or Air Conditioning. This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

 SIGNATURE of OWNER / AUTHORIZED AGENT

 DATE

 PRINT NAME

Property Owner Installation Only – This installation is being made on residential or farm property owned by me or a member of my immediate family, and is exempt from licensing requirements under ORS 701.010. _____
 Property Owner signature

Identify the number of each appliance(s) included in the project. *Example: 2 bath fans; 1 pellet stove.* Permits issued for piping and/or outlets without an appliance will require a separate appliance permit at the time the appliance is installed.

COMMERCIAL APPLIANCES	
Number	Appliance
EXHAUST AND VENTILATION	
	Exhaust fan(s)
	Dryer vent(s)
	Heating duct(s)
	Type 1 hood(s)
	Type 2 hood(s)
GAS FUEL PIPING	
	Gas piping
GAS APPLIANCES	
	Gas water heater
	Gas stove (oven and range/cooktop)
	Gas oven
	Gas range/cooktop
HEATING / COOLING APPLIANCES	
	Furnace
	Heat pump
	HVAC
	Unit Heaters
	Pellet Stove
	Wood Stove
MISCELLANEOUS	
	Gas outlet(s) without appliance
	Generator
OTHER (please list)	

RESIDENTIAL APPLIANCES	
Number	Appliance
EXHAUST AND VENTILATION	
	Attic/crawl space fans
	Single-duct exhaust (bathrooms, toilet compartments, utility rooms)
	Clothes dryer exhaust vent
	Vent/chimney/liner/flue/duct
	Duct work
GAS FUEL PIPING	
	Gas piping
GAS APPLIANCES	
	Gas water heater
	Gas clothes dryer
HEATING / COOLING APPLIANCES	
	Air conditioner
	Air handling unit / HVAC
	Alteration of existing HVAC system
	Furnace (gas or electric)
	Gas log/log lighter/fireplace
	Gas wall/suspended/unit heater
	Heat pump
	Wood or pellet stove/fireplace insert
	Residential boiler (radiator or hydronic) includes piping
MISCELLANEOUS	
	Range (cooking)
	Pool or spa heater
	Range hood/other kitchen equipment
	Oil tanks, generators, etc.
	Domestic incinerator
	Hydronic hot water system (zones)
OTHER (please list)	
	Gas outlet without appliance