



MECHANICAL PERMIT APPLICATION

DATE: _____ ADDRESS: _____
 LANDOWNER NAME: _____ PHONE#: _____
 CONTRACTOR BUSINESS NAME: _____
 CONTRACTOR LICENSE # _____ EXPIRES: _____
 YOUR NAME: _____ PHONE #: _____
 YOUR BUSINESS EMAIL: _____

REINSPECTION FEE ASSESSMENT \$75.00

PERMIT FEES ARE NON-REFUNDABLE

SCOPE OF WORK:

- COMMERCIAL
 NEW ADDITION REMODEL OTHER _____
 RESIDENTIAL
 NEW ADDITION REMODEL OTHER _____
 APPLIANCE CHANGEOUT
 PRESSURE TEST
 LP GAS
 NATURAL GAS

		FEE
HEATING AND COOLING DISTRIBUTION	_____ sq ft Heated X .03 / sq ft RESIDENTIAL _____ sq ft Heated X .06 / sq ft COMMERCIAL	
GAS PIPING SYSTEM (New or Replacement)	\$40/ea W/ Yard Line Yard Line / lbs. or oz. (Circle One) \$30/ea W/O Yard Line	
	Reconnect Gas Test(Administration Fee Charge Only)	
RADIANT IN-FLOOR	Approved R-5 (1") insulation is required underslab \$10/ea.....	
SOLAR H2O HEAT SYSTEM	System Includes Related Equipment and Components \$25/ea.....	
HEATING UNIT (S)	First Unit \$10/ea.....#_ Additional Units @ \$5/ea	
COOLING UNIT (S)	First Unit \$10/ea.....#_ Additional Units @ \$5/ea	
COMBO UNIT (S)	First Unit \$20/ea.....#_ Additional Units @ \$10/ea	
TYPE I HOOD	# Type I Hoods _____ @ \$20/ea.....	
ADMINISTRATIVE FEE	\$40
	TOTAL FEES \$	