## **MECHANICAL PERMIT APPLICATION Building Codes Services** 2705 E 2<sup>nd</sup> Street

The Dalles, OR 97058 Phone: 541-506-2650 • Fax: 541-506-2651 • Web: <u>www.oregon.gov/bcd</u> Email: building.department@oregon.gov

## **DEPARTMENT USE ONLY**

Permit #:\_\_\_\_\_

County: \_\_\_\_\_

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.

Select the appropriate county:  Gilliam  Sherman  Wasco  Wheeler				
CONSTRUCTION CATEGORY	FEE SCHEDULE – EFFECTIVE JANUARY 1, 2014			
□ Residential □ Government □ Commercial		Fee	# of items	Total
<b>JOB SITE INFORMATION &amp; LOCATION</b>	Commercial based on valuation – s			
Job site address:	Furnace/burner including ducts and vents:			
City/State/Zip:	Furnace up to 100k BTU/hr	\$ 12.00		
Project Name:	Furnace greater than 100k BTU/hr	\$ 18.00		
Directions to job site:	Heating/cooling/stove/vents			
	Ductwork – no appliance/fixture	\$ 12.00		
	Suspended heater, recessed wall or floor	\$ 12.00		
	mounted			
Subdivision: Lot #:	Chimney/liner/flue/vent/gas or wood	\$ 12.00		
DESCRIPTION OF WORK	fireplace insert	¢ 10.00		
	Repair/alter/add to mechanical appliance	\$ 12.00 \$ 12.00		
	Evaporative cooler other than portable Air conditioner	\$ 12.00		
Job #:	Ventilation system, not a portion of	\$ 12.00		
PROPERTY OWNER INSTALLATION	HVAC	φ <b>12</b> .00		
Name:	Ventilation fan connected to single duct	\$ 9.00		
Address:	Attic/crawl space fans	\$ 9.00		
City/State/Zip:	Range hood/other kitchen equipment	\$ 9.00		
Phone: Fax:	Clothes dryer exhaust	\$ 9.00		
	Floor furnace including vent	\$ 12.00		
e-mail:	Hydronic hot water system	\$ 24.00		
□ Owner acknowledges installation is being made on	Gas piping	¢ <b>0</b> 4 00	1	1
property owned by me or a member of my immediate	One to four outlets Additional outlets	\$ 24.00 \$ 3.00		
family.	Exterior medium pressure ea 100'	\$ 3.00		
Signature:	Air-handling units including due			
CONTRACTOR INSTALLATION	Any size	\$ 12.00		
Business name:	Heat pump/Mini split system Per each	\$ 12.00		T
Address:		\$12.00		
City/State/Zip:	Incinerators Domestic – installation or relocation	\$ 12.00	1	
Phone: Fax:	Miscellaneous fees	\$ 12.00		
e-mail:	Hourly rate (number of hours)	\$ 78.00		
Contractor CCB license #:	Other heat/cool/vent/appliance, not	\$ 12.00		
□ LP license #:	indicated	¢ 12.00		
	Commercial installations Valuation: \$			
Cianatura	Up to \$3,500	\$ 60.00		
Signature: Make check or money order payable to DCBS. If paying by	\$3,501 to \$10,000 – for 1 <sup>st</sup> \$3,500	\$ 60.00		
credit card, complete all information below. <b>DO NOT SEND</b>	plus \$1.20/\$100 or portion thereof above \$3,500			53,500
CASH.	Over $10,001 - for I^{st} 10,000$	\$138.00		
□ Visa □ Mastercard □ Discover Phone:	plus \$3.00/\$1000 or portion thereof above \$1			\$10,000
	<i>Subtotal:</i> (add up above fees) – minimum fee \$60			
Amount: Expires: CCV:	12% surcharge (.12 x sub-total)			
	Seismic Review – essential facilities (1%)			
Name on card:	Investigative fee – actual cost			
Contraction	Plan review, if req $-50\%$ of subtotal			
Card number:	<b>GRAND TOTAL</b> (fees and surcharges)			
Signature:		<b>U</b> /		-