



APPLICATION FOR MECHANICAL PERMIT



PLEASE FILL OUT THE FOLLOWING INFORMATION

JOB ADDRESS: _____ UNIT NUMBER: _____

CITY/LOCALITY: _____ CROSS STREET: _____

ASSESSOR INFORMATION NUMBER: _____ - _____ - _____

TENANT: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI)

OWNER'S NAME: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI) OWNER/BUILDER: YES NO

ADDRESS: _____ PHONE: (____) _____ EXT: _____

APPLICANT: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI)

ADDRESS: _____ PHONE: (____) _____ EXT: _____

CONTRACTOR: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI) LIC. NUMBER: _____ CLASS: _____

ADDRESS: _____ PHONE: (____) _____ EXT: _____

ARCH/ENG: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI) LIC. NUMBER: _____ CLASS: _____

ADDRESS: _____ PHONE: (____) _____ EXT: _____

WORK DESCRIPTION: _____

PLEASE FILL OUT THE REVERSE SIDE

MECHANICAL FEES

<u>ITEM</u>	<u>QUANTITY</u>	
02 REFRIG COMPRESSORS	<100 KBTU	_____ Comp(s)
03 REFRIG COMPRESSORS	101 – 500 KBTU	_____ Comp(s)
04 REFRIG COMPRESSORS	>500 KBTU	_____ Comp(s)
08 FURNACE/HEATER	<100 KBTU	_____ Unit(s)
09 FURNACE/HEATER	101 – 500 KBTU	_____ Unit(s)
10 FURNACE/HEATER	>500 KBTU	_____ Unit(s)
17 BOILER	<100 KBTU	_____ Comp(s)
18 BOILER	101 – 500 KBTU	_____ Comp(s)
19 BOILER	>500 KBTU	_____ Comp(s)
20 FIRPLACE/GAS LOG	<100 KBTU	_____ Appl(s)
21 FIRPLACE/GAS LOG	101 – 500 KBTU	_____ Appl(s)
22 FIRPLACE/GAS LOG	>500 KBTU	_____ Appl(s)
30 AIR INLETS/OUTLETS (EACH)		_____ Unit(s)
31 AIR INLETS/OUTLETS (AREA)		_____ Sq Ft
32 APPLIANCE VENT (OTHER)		_____ Unit(s)
35 AIR HANDLING UNIT	<2000 CFM	_____ Ahu(s)
36 AIR HANDLING UNIT	2000 – 10000 CFM	_____ Ahu(s)
37 AIR HANDLING UNIT	>10000 CFM	_____ Ahu(s)
40 EVAPORATIVE COOLERS		_____ Unit(s)
41 VENTILATION FAN (SINGLE REGISTER)		_____ Fan(s)
42 VENTILATION SYSTEM (OTHER)		_____ System(s)
43 COMMERCIAL KITCHEN EXHAUST HOODS		_____ Hood(s)
44 SPRAY BOOTH		_____ Booth(s)
45 PRODUCT CONVEYING DUCT SYSTEM		_____ System(s)
46 FIRE DAMPERS		_____ Damper(s)
47 ALTERATION OF EXIST DUCT SYSTEM		_____ System(s)

FOR BUILDING AND SAFETY USE ONLY

01 PERMIT ISSUANCE FEE	_____
0W PLAN CHECK FEE (MECH CODE)	_____
65 ADDITIONAL PLAN CHECK	_____ Hood(s)
66 ADDITIONAL PLAN CHECK (GREASE EXHAUST)	_____ System(s)
67 ADDITIONAL PLAN CHECK (STAIR PRESSURE)	_____ System(s)
68 ADDITIONAL PLAN CHECK (PRODUCT CONVEY)	_____ System(s)
70 PLAN CHECK GARAGE VENTILATION	_____ Hood(s)
71 PLAN CHECK GREASE EXHAUST ONLY	_____ System(s)
72 PLAN CHECK STAIR PRESSURE ONLY	_____ System(s)
73 PLAN CHECK PRODUCT CONVEY ONLY	_____ System(s)
74 PLAN CHECK ENERGY (TENANT IMP. W/O BLDG PERMIT)	_____ Sq Ft
75 SUPPLEMENTAL PLAN CHECK FEE	_____ Hour(s)
53 INVESTIGATION FEE NO PERMIT R-3 OWNER/BUILDER	_____ Each
54 INVESTIGATION FEE NO PERMIT OTHER	_____ Each
55 NONCOMPLIANCE FEE R-3 OCCUPANCY	_____ Each
56 NONCOMPLIANCE FEE OTHER OCCUPANCY	_____ Each
57 BOARD OF APPEALS FEE	_____ Select
59 ALTERNATE MATERIAL FEE	_____ Hour(s)