

City of Manzanita

P.O. Box 129 Manzanita, OR 97130-0129 Phone (503) 368-5343 Fax (503) 368-4145 building@ci.manzanita.or.us

RESIDENTIAL MECHANICAL PERMIT APPLICATION				
DEPARTMENT USE ONLY				
Permit No:				
Date Issued:	Ву:			

WORK SITE LOCATION:

PARENT PERMIT NUMBER: (Building)					
STREET ADDRESS OF WORK SITE:					
CATEGORY OF CONSTRUCTION:					
One/Two Family	Manufactured home				
TYPE OF WORK:					
New	Gas line only				
Addition	Accessory Structure				
Alteration/Repair					
PROJECT DESCRIPTION:					

DEODI E INFORMATION.

APPLICANT:		
Name:		
Full Mailing Address:		
City:	State:	Zip:
Phone:		
Email:		
PROPERTY OWNER	R:	
Same as applicant? Y	es No	
Name:		
Full Mailing Address:		
City:	State:	Zip:
Phone:		
Email:		
CONTRACTOR INST	TALLATION	
Same as applicant? Y	es No	
Business Name:		
Address:		
City/State/Zip:		
Phone:	Fax:	
E-mail:		
CCB license no.:	C	ity Lic No.:
REQUIRED DOCUM	ENTS FOR API	PLICATION
I have downloaded and r		
Checklist (Initials):		is and documents
SUBMITTAL METHO	OD FOR PLANS	S AND DOCS

Notices

Expiration of application: This application is valid for 180 days after it has been accepted as complete.

Inspections required: Approved city inspections must be completed before the work performed is enclosed.

Terms and conditions

Authorized Signature:

Correct information: I hereby certify 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.

Copyright release for government entities: I hereby grant permission to the City of Manzanita to copy, in whole or part, drawings and all other materials

submitted by me, my agents, or representatives. This grant of permission extends and legal functions, including sharing of information with other governmental entities.

Indemnity: I, the permit applicant, shall indemnify, defend and hold harmless the City of Manzanita, its officers, employees and agents from any and all claims arising out of or in connection with work done under this permit. Owner installation: This installation is being made on residential or farm property owned by me or a member of my immediate family. This property is not intended for sale, exchange, lease, or rent. OAR 479.540(1) and 479.560(1).

Owner permission: I have the legal right or permission from any property owner whose property is affected by the work covered under this permit to: 1) enter the property; 2) perform the work covered under this permit; 3) leave structures on or in the affected property. The issuance of this permit shall not be construed as permission or a grant of a legal right to enter upon or remain on any property affected by the work covered under this permit.

Electronic signature certification: By attaching an electronic signature (whether typed, graphical or free form) I certify herein that I have read, understood and confirm all the statements listed above and throughout the application form. I agree (initials):

Print Name: ___

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FEES:

Description	Qty	Each	Total
Heating/Cooling			
Air Conditioner			
Boiler *** State BCD approval required (Boiler gas connect and venting			
Furnace, including ductwork, vent, liner			
*Floor			
*Furnace -up to 100,000 BTU			
*Furnace -greater than 100,001 BTU			
Evaporative cooler			
Air Handling Unit *up to 10,000 cfm			
Air Handling Unit *over 10,001 cfm			
Heaters: suspended, wall of floor mounted			
Heat pump Hydronic piping system			
Other Equipment			
Above-ground tanks: Gas/Oil/Diesel (Connection and venting only)			
Clothes Dryer			
Decorative Fireplace			
Gas or Wood Fireplace/insert			
Installation or relocation domestic type incinerator			
Mini split system			
Oil tank/gas generators			
Pool or spa heater			
Range or other appliance including installation of controls			
Water heater			
Other heating/cooling appliance or fuel appliance			
Environmental exhaust and ventilation (includes relocation)			
Ductwork or venting, alternations/additions		Τ	
Clothes dryer exhaust			
Flue vent for water heater or gas fireplace			
Chimney: liner/flue/vent w/o appliance			
Attic/crawlspace fans			
Single-duct exhaust vent			
Whole house ventilation or radon mitigation			
Fuel Piping; gas equipment (includes relocation) Fuel Piping- Gas Connections – 1-4 outlets			
Each additional outlet			
Specify:			
MECHANICAL PERMIT FEES A) Downsit Subtatal (from about a backlist)			
A) Permit Subtotal (from above checklist)			
B) Minimum Permit Fee (only applicable if line A is less than \$106			
C) Enter the larger of either A or B per above		<u> </u>	
D) State Surcharge (12% of Permit Total – Line C x 0.12)			
E) Plan Review 35% of Line C			
F) Technology fee 5% of total of Line C and E			
TOTAL PERMIT			

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