



APPLICATION FOR MECHANICAL PERMIT

APPLICATION NO.: ME _____ LOC: BS _____

PLEASE FILL OUT THE FOLLOWING INFORMATION

JOB ADDRESS: _____ UNIT NO.: _____

CITY/LOCALITY: _____ CROSS - ST: _____

ASSESSOR INFORMATION NO.: _____ -- _____ -- _____

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. NO.: _____ CLASS: _____

ADDRESS: _____

PHONE (____) _____ Ext. _____

ARCH/ENG: _____
(LAST NAME/BUSINESS NAME) (FIRST) (MI)

LIC. NO.: _____ CLASS: _____

ADDRESS: _____

PHONE (____) _____ Ext. _____

WORK DESCRIPTION: _____

MECHANICAL FEES

ITEMS

UNITS

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	_____	Boiler(s)
18	BOILER	101 - 500 KBTU	_____	Boiler(s)
19	BOILER	> 500 KBTU	_____	Boiler(s)
20	FIREPLACE/GAS LOG	< 100 KBTU	_____	Appl(s)
21	FIREPLACE/GAS LOG	101 - 500 KBTU	_____	Appl(s)
22	FIREPLACE/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 (GARAGE VENTILATION)	_____	System(s)
66	ADDITIONAL PLAN CHECK (GREASE EXHAUST)	_____	Hood(s)
67	ADDITIONAL PLAN CHECK (STAIR PRESSURE)	_____	System(s)
68	ADDITIONAL PLAN CHECK (PRODUCT CONVEY)	_____	System(s)
70	PLAN CHECK GARAGE VENTILATION	_____	Systems
71	PLAN CHECK GREASE EXHAUST ONLY	_____	Hood(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 MATERIALS FEE	_____	Hour(s)