

Signature:

City of Kelso Mechanical Permit Application

MINGTON: U.S.	T CITITIC T IPPT	10411011				
Permit #:	Zoning:		RV:			
Questions and applications can be directed to the following:	203 S. Pa	Building and Planning 203 S. Pacific Ave., Suite 208 Kelso, WA 98626		360.423.9922 (office) 360.423.6591 (fax) <u>building@kelso.gov</u> (email)		
PROJECT SITE INFORMATION Address/Location:		Parcel #	:			
PROPERTY OWNER						
Business Name:		Contact Name				
Mailing/Billing Address:		City:		State:	Zip:	
Phone:	1	Email:				
APPLICANT (If different from property Business Name:		Contact Name				
Mailing/Billing Address:		City:		State:	Zip:	
Phone:		Email:				
none.	1	zman.				
CONTRACTOR Business Name:	(Contact Name:				
Mailing/Billing Address:	(City:		State:	Zip:	
Phone:		Email:				
			IE : .: D			
WA State License # (Not UBI#):			Expiration Da	ate:		
City of Kelso Business License # (Permit cannot be issued until one is obtained): Expir			Expiration Da	piration Date:		
DETAILED PROJECT DESCRIPTION						
Building Type – Check all that apply:		Total Project Valuation				
☐ Residential ☐ Commercial		(Fair Market Value Labor	+ Materials):			
MECHANICAL PERMIT CHECKLIST				Provide	d Not Applicable	
Scope of Work*						
Site plan showing the location, type and size	of all ductwork, damp	ers, hoods and equipm	ent			
Equipment Detail Sheets						
*Larger commercial projects may req		submittal and review.	Plan review	fees [70%	IBC/65% IRC].	
PROPERTY OWNER OR AUTHOR I hereby certify that I have read and examine		know the same to be to	rue and corre	oct and Lan	n authorized to apply	
for this permit.	ca ans application and	Know the same to be the	i uc and come	ci, anu i al	ii autiiorized to appry	

FOR OFFICE USE ONLY

Date:

Printed Name:



Permit #:

City of Kelso

FOR OFFICE USE ONLY

RV:

Mechanical Permit Application

Zoning:

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	360.42				
Value WA 00626		360.423.6591 (fax)			
Kelso, WA 98626 PERMIT INFORMATION – CHECK ALL THAT APPLY					
TEM QTY	FEE	TOTAL			
Permit Base Rate 1	\$ 28.00				
Supplemental Permit to Active Building Permit (modification to original permit application)	\$ 14.00				
EQUIPMENT	 ' 				
Furnace – forced air or gravity, (includes ducts and vents)	\$ 20.00				
Boiler	\$ 20.00				
Compressor and/or Absorption System (includes heat pumps)	\$ 20.00				
Evaporative Coolers	\$ 20.00				
Air Handler (Not part of an HVAC system)	\$ 20.00				
Ventilation system (Not part of an HVAC system)	\$ 20.00				
Fireplace insert, Gas fireplace	\$ 20.00				
☐ Incinerator	\$ 20.00				
Fire damper, smoke damper or combination fire/smoke damper	\$ 20.00				
☐ Equipment regulated by the mechanical code but not specifically listed	\$ 20.00				
Repairs or addition to each piece of equipment or system	\$ 18.00				
VENTS					
Appliance vent (for a piece of equipment not requiring a mechanical permit)	\$ 10.00				
☐ Ventilation fan connected to a single vent	\$ 10.00				
PIPING SYSTEMS					
☐ Gas (1-4 ea.) ☐ Hazardous Process (1-4 ea.) ☐ Non-Hazardous Process (1-4 ea.)	\$ 7.00				
For the installation of each outlet exceeding four	\$ 3.00				
FIXTURE TOTAL:					
OTHER INSPECTIONS AND FEES					
Services beyond the scope of the initial permit (See Master Fee Schedule for fee explanation)	\$ 65.00				
Investigation fee for work commenced prior to obtaining a permit Double	e permit fee				
Mechanical permit extension 50% or	riginal fee				
Building Permit Fees Calculated Separately SUBTOTAL: \$					
PROPERTY OWNER OR AUTHORIZED AGENT I hereby certify that I have read and examined this application and know the same to be true and correct, and I	om outhoriza	d to apply			
for this permit.	ani authorize	и ю арріу			
tor and portate.					
Signature: Printed Name:	Data				
Signature: Printed Name:	Date:				