

## **Mechanical Permit Application**

City of Durham

17160 SW Upper Boones Ferry Road, Durham, OR 97224

Phone: 503-639-6851 Email: assistant.cityofdurham@comcast.net durham-oregon.us
Call for Inspections: 503-691-3040

OFFICE USE ONLY						
Date Received: _	Permit #:					
Date Issued:	By: Receipt #:					

TYPE OF WORK			COMMERCIAL FEE SCHEDULE			
☐ New Construction	☐ Demolition		Mechanical permit fees for commercial jobs are based on the value of			
☐ Addition/Alteration/Replacement	Other:		the work performed. Indicate the value (rounded to the nearest dollar) of			
CATEGORY OF CONSTRUCTION			all mechanical materials, equipment, labor, overhead, and profit.			
			Value: \$			
1- and 2-Family Dwelling	Commercial	V. Canada de Mariero de Cada, es	RESIDENTIAL EQUIPMENT / SYSTEMS FEES			
Accessory Building	☐ Multi-Famil	у	Description	Qty. Ea.	Total	
☐ Master Builder	Other:		Heating/Cooling			
JOB SITE INFORMATION AND LOCATION		ON	Furnace, incl. ductwork, vent, and liner	26.25	i	
Job Site Address:			Air conditioner (site plan required)	26.25		
City/State/ZIP:			Heat pump (site plan required)	26.25	;	
Suite/bldg./apt. no.:	Project Name:		Duct work, alterations and additions	26.25		
Cross street/directions to job site:	Troject Ivalie.		Hydronic hot water system	26.25		
Cross street/directions to job site.			Residential boiler (radiator/hydronic)	26.25		
			Unit heaters (fuel-type, not electric), in- wall, in-duct, suspended, etc.	26.25		
Subdivision:	Lot no.:		Flue/Vent for any of the above	26.25		
Andrew 177 agr 192	Lot no		Other:	26.25		
Tax map/parcel no.:			Other Fuel Appliances			
DESCRIPTION OF WORK			Water Heater	26.25		
			Gas fireplace/insert/stove	52.50		
			Gas log/log lighter	26.25		
			Wood/pellet stove/insert	26.25		
VALUE OF WORK PERFORMED			Chimney/liner/flue/vent w/o appliance	26.25		
(must provide an estimated cost)			Other:	26.25		
			Environmental Exhaust and Ventilation			
PROPERTY OWNER			Range hood/other kitchen equipment	26.25		
Name:			Clothes dryer exhaust	26.25		
Address:			Single-duct exhaust (bathrooms, toilet			
City/State/ZIP:			compartments, utility rooms)	26.25		
Email:	Phone:		Attic/crawlspace fans	26.25		
APPLIC	APPLICANT		Whole house ventilation/radon mitigation	52.50		
Business Name:			Fuel Piping			
			\$26.25 for first four (4) outlets; \$15.75 fo	r each additional c	outlet	
Contact Name:			Furnace		T	
Address:			Wall/suspended/unit heater			
City/State/ZIP:			Water Heater			
Email:	Phone:		Fireplace/log lighter/gas log			
CONTRACTOR			Range			
Business Name:			Barbecue			
Address:			Clothes Dryer			
City/State/ZIP:			Total Outlets			
		MECHANICAL PER	ERMIT FEES			
Email:	Phone:		Fee Type	Amount	Date Paid	
CCB Lic (required).:	City or Metro Li	ic.:	Permit Fee (minimum \$115.50) Plan Review (70% of permit fee)			
			Plan Review (70% of permit fee)  Fire & Life Safety (45% of permit fee)			
Authorized Signature:			State Surcharge (12% of permit fee)			
~ · B · · · · · · · · · · · · · · · · ·			Technology Fee (3% of permit fee)			
	T		TOTAL FEES			
Print Name:		Date:	This is the second of the seco			

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.