

Mechanical Permit Application

Community Development Department-Building Division

305 Main Street, Klamath Falls, OR 97601 Phone: (541) 883-5121 #1 | Fax: (541) 885-3644 Web: www.klamathcounty.org

OFFICE USE ONLY		
Permit No:		
Received By:	Approved By:	

V	To apply online go to: h	attps://aca.oregon.acc	cela.com/oregon/				
	TYPE OF WORK		COMMERCIAL FEE SCHEDULE – USE CHECKLIST				
□ New construction □ Addition/alteration/replacement □ Demolition □ Other:			Mechanical permit fees are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all mechanical materials, equipment, labor, overhead, and profit.				
CATEG	ORY OF CONSTRUCTION		Value: \$				
☐ 1- and 2-family dwelling	Commercial/industrial	Accessory building	,				
☐ Multi-family	Master builder	Other:	For special information use checklist.				
JOB SITE INFORMATION AND LOCATION			Description For special information	Oty.	Ea.	Total	
Job site address:			Heating/cooling - Please see back of f	€ /			
			Air conditioner	orm for some	16.00	incircs	
City/State/ZIP:		Air handling unit of up to 10,000		16.00			
Suite/bldg./apt. no.: Project name:		Air handling unit of up to 10,001 over		16.00			
Cross street/directions to job site:			Boiler up to 200,000 BTU		16.00		
eross sarees ancestons to job si			Evaporative cooler other than portable		16.00		
			Floor furnace, including vent		16.00		
			Furnace/burner, incl. ductwork, vent, and liner		16.00		
Subdivision:	Lot no.:		Gas or wood fireplace/insert		16.00		
			Heat pump		16.00		
Tax map/parcel no.:			Hydronic hot water system		16.00		
DES	SCRIPTION OF WORK		Suspended heater, recessed wall heater,		16.00		
			or floor mounted unit heater Other heating/cooling:		16.00		
			Other fuel appliances - Please see bac	ck of form fo		equirements	
			Barbecue	K OI IOI III IO	16.00	quirements	
			Chimney/liner/flue/vent w/o appliance		16.00		
			Decorative gas fireplace		16.00		
PROPERTY OWN	IER	TENANT	Installation or relocation domestic- type incinerator		16.00		
Name:			Oil tanks/gas/diesel generators		16.00		
Address:			Pool or spa heater, kiln*		16.00		
			Radon mitigation		16.00		
City/State/ZIP:			Water heater		16.00		
Phone: ()	Fax: ()		Wood/pellet stove/insert		16.00		
	APPLICANT		Other fuel appliance:		16.00		
Business name:			Environmental exhaust and ventilation)n	16.00		
			Attic/crawlspace fans Clothes dryer exhaust		16.00 16.00		
Contact name:			Flue vent for water heater or gas		10.00		
Address:			fireplace		16.00		
City/State/ZIP:			Hood served by mechanical exhaust, including ducts for hood		16.00		
Phone: ()	Fax: ()		Range hood/other kitchen equipment		16.00		
E-mail:			Ventilation fan connected to single duct		16.00		
E-man.	CONTRACTOR		Ventilation system not a portion of heating or air-conditioning system		16.00		
Business name:			- authorized by permit Other environment exhaust/ventilation:		16.00		
			Fuel piping		10.00		
Address:			Gas fuel piping outlets		16.00		
City/State/ZIP:			MECHANICAL	PERMIT FE	ES		
Phone: ()	Fax: ()			ubtotal \$			
E-mail:	•		Permit (minimum \$	/ T			
			Plan review (25% of perr				
CCB Lic #:	LP Lic#:		State surcharge (12% of pern				
Authorized signature:			TOTAL PERMIT		4-14-1-1-1	41.2	
			This permit application expires if a	permit is not	t obtained wit	tnın	

MECHANICAL Permit Fees				
Commercial Mechanical Permit:				
Mechanical Valuation	Fee			
\$1 - \$2,000	\$86			
\$2,001- \$25,000	\$86 for the first \$2,000+ \$10.70 for each additional \$1,000, or fraction thereof, to and including \$25,000			
\$25,001 - \$50,000	\$332.10 for the first \$25,000 + \$8.00 for each additional \$1,000 or fraction thereof, to and including \$50,000			
\$50,001 - \$100,000	\$532.10 for the first \$50,000 + \$6.00 for each additional \$1,000 or fraction thereof, to and including \$100,000			
\$100,001 and up	\$832.10 for the first \$100,000 + \$4.85 for each additional \$1,000 or fraction thereof			
Plan Review:	Plan review fee shall be 25% the mechanical permit fee.			
Reinspection or Investigation:	\$86/ hour with 1 hour minimum.			
Work commencing w/o permit:	Fee equal to permit fee in addition to the required permit fees.			
Inspection or plan review outside of	\$129 / hour with 2 hour minimum.			
normal hours or scope:				
Seismic Surcharge:	Equal to 1% of permit fee for structures classified as essential facilities, hazardous facilities, major structures and special occupancy structures as defined in ORS 455.447.			

Minimum Document Requirements for MECHANICAL Permit Application
Requirements:
Prior to Final mechanical Inspection – Must submit Solid Fuel Burning Appliance Installation Supplement
Wood burning stoves require documentation of EPA certification per Klamath County Ordinance Number 406 (Clean Air Ordinance) Information is available at www.co.klamath.or.us and select "Environmental Health"
A list of certified woodstoves and fireplace inserts is available at:
http://www2.epa.gov/sites/production/files/2013-08/documents/certifiedwood.pdf
Commercial & Multi-Family:
Indicate all that apply by checking Yes or No below. Mechanical Plan Review is required for any Yes answer(s). Provide two complete sets of plans, manufacture cut-sheets, specifications and calculations:
Yes / No
☐ New Commercial or Multi-Family building.
☐ Tenant Improvement infill or remodel where floor space is 2,000 sq. ft. or greater.
☐ Change of Use or Occupancy when the building or tenant space is 2,000 sq. ft. or greater.
 ☐ Occupancy is for a Salon or other use involving caustic materials. ☐ Occupancy is for a Hospital, Medical Clinic, Medical Lab, or Dental Office.
☐ Occupancy is for any Hazardous occupancy classification (Consult with Commercial Plans Examiner if uncertain).
☐ Roof mounted equipment weighing 400lbs or more (Cut-sheets required for verification of weight).
☐ Type I hood
☐ ☐ Spray booth