



MECHANICAL PERMIT APPLICATION

City of White Salmon
 P.O. Box 2139 / 100 N. Main
 White Salmon, WA 98672
 509-493-1133 fax 509-493-1231

DEPARTMENT USE ONLY	
Permit #	
Office:	
By:	Issue Date:
Zoning approval verified?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Sanitation approval verified?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Permits expire if work is not started within 180 days of issuance or if work is suspended for 180 days.

Construction Category	Fee Schedule												
<input type="checkbox"/> Residential <input type="checkbox"/> Government <input type="checkbox"/> Commercial <input type="checkbox"/> New <input type="checkbox"/> Accessory Building <input type="checkbox"/> Addition/alteration/repair <input type="checkbox"/> Other	<table border="1"> <thead> <tr> <th>Description</th> <th>QTY</th> <th>Fee</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Permit Issuance Fee</td> <td></td> <td>\$ 50.00</td> <td></td> </tr> <tr> <td>Supplemental Permit Fee/Tech Fee</td> <td></td> <td>\$ 10.00</td> <td></td> </tr> </tbody> </table>	Description	QTY	Fee	Total	Permit Issuance Fee		\$ 50.00		Supplemental Permit Fee/Tech Fee		\$ 10.00	
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Permit Issuance Fee		\$ 50.00											
Supplemental Permit Fee/Tech Fee		\$ 10.00											
Job Site Information Twnshp: Range: Sect: Tax Lot: Job Street Address: City / State / Zip: Subdivision: Lot #:	Commercial (valuation based or hourly rate as determined by Building Official) Enter total valuation of mechanical system and installation cost: \$ Fee based on valuation \$												
Description of Work: _____ _____ _____	Residential Install/Replace furnace/burner incl. ductwrk and/or vents Up to and incl 100k BTU/hr \$ 10.00 Over 100k BTU/hr \$ 12.00												
Property Owner: Name: Mailing Address: City: State: Zip: Phone: Fax: E-mail: SIGNATURE REQ'D _____	Heaters / Stoves / Vents Install/replace/relocate unit heater \$ 6.00 Wood / pellet / gas stove and/or flue \$ 7.50 Repair / Alter / Add to hfg appliance, refrig unit, cooling sys, absorptive sys \$ 10.00 Evaporated cooler \$ 7.50 Ventilation system \$ 7.50 Single duct exhaust (tl/bath/utility) \$ 5.00 Equip. vent other than furnace \$ 5.00 Range hood / Dryer exhaust \$ 7.50 Hydronic System \$ 10.00												
Contractor Installation: Company: Address: City: State: Zip: Phone: Fax: E-mail: CCB / LP No: Expires:	Fuel Piping - # of Items Requiring Fuel Piping: _____ Furnace _____ Unit heater _____ Water heater _____ Fireplace _____ Range _____ Clothes Dryer _____ Other: _____ Fuel Piping - up to 4 outlets \$ 3.50 Ea. additional over 4 outlets \$ 1.00												
Print Name: SIGNATURE REQ'D _____	Air Handling Units including ducts Up to and incl 10,000 CFM \$ 10.00 Over 10,000 CFM \$ 12.00												
Permits are required to be posted on site: All provisions of laws and ordinances governing this work will be complied with, whether specified herein or not.	Compressor / Absorption System / Heat Pump/Air Conditioner Heat Pump (site plan required) \$ 10.00												
	Incinerators Domestic Incinerator \$ 12.50												
	Boiler/Compressor Installation/Relocation up to 15 HP or 500K BTU \$ 30.00 over 15 HP or 500K BTU \$ 60.00												
	Plan Review (when reqired) \$ Misc. / Hourly @ \$85.00 \$												
	TOTAL FEES \$												