CITY OF COOS BAY
Community Development Department
500 Central Avenue, Coos Bay, Oregon 97420
Phone 541-269-8918 Fax 541-269-8916

Permit No. **187-M___-** _____

Date _____

MECHANICAL PERMIT

APPLICANT/AGENT shall provide the following information: (Please Print)

1._____
Job Address Lot/Parcel #

2._____
Applicant Address Phone Email

3._____
Property Owner (if different) Address Phone Email

4._____
Contractor CCB# Address Phone Email

5. Brief Description of Work: ☐New ☐Alteration ☐ Repair

_____

_____

COMMERCIAL FEE CALCULATION	
Commercial permits are based on total valuation to complete the job.	
Job Valuation	_____
Permit Fee	_____
12% Surcharge	_____
Fire/Life/Safety Fee	_____
TOTAL	_____

RESIDENTIAL FEE CALCULATION

	FEE	12%	TOTAL
For installation, relocation, or alteration of each appliance, including vents, ducts, and metal chimneys	$35.00	$4.20	$39.20
For each vent, duct, or metal chimney not included in an appliance permit	$10.00	$1.20	$11.20
Fuel gas, hazardous, or non-hazardous piping system	$25.00	$3.00	$28.00
Other inspections, per hour (1 hr min)	$70.00	$8.40	$78.40
Minimum fee	**$60.00**	**$67.20**	**$67.20**

State surcharge is 12% of applicable fees

Separate permits are required for Electrical, Plumbing, Heating, Ventilating or Air Conditioning.

This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

_____ _____
SIGNATURE of OWNER / AUTHORIZED AGENT DATE

_____
PRINT NAME

Property Owner Installation Only – This installation is being made on residential or farm property owned by me or a member of my immediate family, and is exempt from licensing requirements under ORS 701.010.

_____
Property Owner signature

Identify the number of each appliance(s) included in the project. *Example: 2 bath fans; 1 pellet stove*

Please be advised that permits issued for piping and/or outlets without an appliance will require a separate appliance permit at the time the appliance is installed.

COMMERCIAL APPLIANCES	
Number	**Appliance**
EXHAUST AND VENTILATION	
	Exhaust fan(s)
	Dryer vent(s)
	Heating duct(s)
	Type 1 hood(s)
	Type 2 hood(s)
GAS FUEL PIPING	
	Gas piping
GAS APPLIANCES	
	Gas water heater
	Gas stove (oven and range/cooktop)
	Gas oven
	Gas range/cooktop
HEATING / COOLING APPLIANCES	
	Furnace
	Heat pump
	HVAC
	Unit Heaters
	Pellet Stove
	Wood Stove
MISCELLANEOUS	
	Gas outlet(s) without appliance
	Generator
OTHER (please list)	

RESIDENTIALAPPLIANCES	
Number	**Appliance**
EXHAUST AND VENTILATION	
	Attic/crawl space fans
	Single-duct exhaust (bathrooms, toilet compartments, utility rooms)
	Clothes dryer exhaust vent
	Vent/chimney/liner/flue/duct
	Duct work
GAS FUEL PIPING	
	Gas piping
GAS APPLIANCES	
	Gas water heater
	Gas clothes dryer
HEATING / COOLING APPLIANCES	
	Air conditioner
	Air handling unit / HVAC
	Alteration of existing HVAC system
	Furnace (gas or electric)
	Gas log/log lighter/fireplace
	Gas wall/suspended/unit heater
	Heat pump
	Wood or pellet stove/fireplace insert
	Residential boiler (radiator or hydronic) includes piping
MISCELLANEOUS	
	Range (cooking)
	Pool or spa heater
	Range hood/other kitchen equipment
	Oil tanks, generators, etc.
	Domestic incinerator
	Hydronic hot water system (zones)
OTHER (please list)	
	Gas outlet without appliance