

IMPORTANT CHANGE - The Building Safety Department will perform inspections on Tuesdays and Thursdays only effective July 1, 2011.



Mechanical Permit Application
 City of Troutdale
 104 SE Kibling Avenue Troutdale Or 97060
 Permit Specialist 503 674-7229

Application No.	Permit No.
Date Received	Date Issued
Received By	Issued By
Receipt No.	Receipt No.

Inspection Requests: Phone: 503 674-7204 Fax: 503 667-0524 E-mail: inspection@troutdaleoregon.gov

TYPE OF WORK	COMMERCIAL FEE* SCHEDULE USE CHECKLIST			
<input type="checkbox"/> New construction <input type="checkbox"/> Addition/alteration/replacement <input type="checkbox"/> Demolition <input type="checkbox"/> Other	Permit fees* are based on the value of the work performed. Indicate the value (rounded to the nearest dollar) of all equipment, materials, labor, overhead, and profit for the work indicated on this application. Valuation \$			
CATEGORY OF CONSTRUCTION				
<input type="checkbox"/> 1- & 2-family dwelling <input type="checkbox"/> Commercial/industrial <input type="checkbox"/> Accessory building <input type="checkbox"/> Multi-family <input type="checkbox"/> Master builder <input type="checkbox"/> Other				
JOB SITE INFORMATION AND LOCATION	RESIDENTIAL FEES* DESCRIPTION	#	FEE	TOTAL
Address:	Heating/cooling		18.00	
City/State/Zip:	Furnace, incl. ductwork, vent and liner		18.00	
Suite/bldg./apt. no.: Project name:	Air conditioner (site plan required)		36.00	
Subdivision: Lot no.:	Heat pump (site plan required)		8.00	
Tax map/parcel no.:	Duct work, alteration and additions		22.00	
DESCRIPTION OF WORK	Hydronic piping system		22.00	
	Boiler, including vent**		36.00	
	Gas heaters/unit in-wall, in-duct, suspended, etc. not including vent		18.00	
	OTHER FUEL APPLIANCES			
	Water heater		16.00	
	Gas fireplace/insert/stove		18.00	
PROPERTY OWNER	Gas log/log lighter		16.00	
Name:	Pool or spa heater, kiln*		22.00	
Address:	Wood/pellet stove/insert		40.00	
City/State/Zip:	Wood fireplace		40.00	
Phone: Fax:	Chimney/liner/flue/vent w/o appliance		14.00	
APPLICANT	Oil tanks/gas/diesel generators		36.00	
Business name:	Other:		22.00	
Contact name:	ENVIRONMENTAL EXHAUST AND VENTILATION			
Address:	Range hood/other kitchen equipment		8.00	
City/State/Zip:	Clothes dryer exhaust		8.00	
Phone: Fax:	Single-duct exhaust (bathrooms, toilet compartments, utility rooms)		8.00	
E-mail:				
CONTRACTOR	Attic/crawlspace fans		8.00	
Business name:	Whole house ventilation or radon mitigation			
Address:	Other:		22.00	
City/State/Zip:	FUEL PIPING \$8.00 FOR THE FIRST FOUR; \$2.00 FOR EACH ADDITIONAL			
CCB license no.:	Furnace, etc.			
City or Metro license no.:	Wall/suspended/unit heater			
Phone: Fax:	Water heater			
E-mail:	Fireplace/log lighter/gas log			
Authorized signature:	Range/ Barbeque/ Cloths dryer (circle)			
Print name: Date:	Other:			
This permit application expires if a permit is not obtained within 180-days after it has been accepted as complete. Permits are non-transferable and expires 180-days from issuance or last inspection. * Site plan required for an outdoor unit. ** State Building Codes Division's approval required	MECHANICAL PERMIT FEES			
	Mechanical Permit Fee	\$		
	Minimum Permit Fee	\$ 50.00		
	12% State Surcharge	\$		
	25% Commercial Plan Review Fee	\$		
	Deposit	\$		
DEPT. APPROVAL INITIAL & DATE:	Total Due	\$		

