

2022

MECHANICAL PERMIT APPLICATION

Missoula County Building Inspection Division 6089 Training Drive, Missoula MT 59808 Office: (406) 258-3701 / Fax: (406) 258-4864

permits@missoulacounty.us www.missoulacounty.build

Radiant Floor Heat **excluding boiler

| APPLIED DATE: | ISSUED DATE: |
|---------------|--------------|

MM #_

INSTRUCTIONS

All sections must be completed with the required information, or the application will not be processed. Please read all conditions on this application before signing. The property owner and/or licensed contractor must sign and date the application. If the Owner has hired a Mechanical Contractor, that Contractor should apply for this permit themselves. A separate permit application is required for each building or structure except townhouses or commercial tenant spaces where each unit requires a permit.

| PROJECT ADDRESS: | | | | e#L | Jnit# | Apt# |
|--|--|-----------------|---------------|--------------------|-------------|------|
| Please use www.gis.missoulacounty.us to | | | issoula | | | |
| **If applicable enter Building Permit num | ber here – MB# | | | | | |
| CITY: | ZIP CODE: | Mobile I | Home Park: | | | |
| | | | | | | |
| GEOCODE FOR PROPERTY | OR TAX I | D# | | _ | | |
| | RESIDENTIAL PROJ | ECT | | | | |
| No. Civile 5: will Beside as | | | D | -1 - 1 / A -1 -1°1 | • | |
| New Single-Family Residence | DuplexIVIUITI-Family | _#Units | кето | aei/Aaait | ion | |
| Detached Accessory Structure | | | | | | |
| | | | | | | |
| | COMMERCIAL PRO | JECT | | | | |
| New ConstructionRemode | l/AdditionCell TowerOth | ner | | | | |
| Change Of Use/Tenant Improvem | ent (Specify Use) | | | | | |
| | | | | | | |
| Business Name: | | | | | | |
| APPLICANT / CONTACT PERSON | | | | | | |
| Name: | Phone# | Eı | mail: | | | |
| | | | | | | |
| "PROPERTY" OWNER ** Must match ov | vner found at www.gis.missoulacounty.us | | | | | |
| Name: | Phone# | E1 | mail: | | | |
| Address: | | | | | | |
| | | | Juic | 2.p C | ouc | |
| CONTRACTOR SAME AS (| <u>OWNER</u> | | | | | |
| Name: | Phone# | Er | mail: | | | |
| Address: | | | | | | |
| | City | | Juic | 2.p C | ouc | |
| TENANT (if other than owner) | | | | | | |
| Name: | Phone# | Er | mail: | | | |
| | | | | | | |
| | PROPOSED WOR | <u>{K</u> | | | | |
| | | | | | | |
| | | | | | | |
| FFFC | | | | | | |
| FEES **Check Applicable Box Below | | | | | | |
| RESIDENTIAL PERMIT ISSUANCE | FEE | | \$44.00 | | | |
| COMMERCIAL PERMIT ISSUANCE | CE FEE | | \$86.00 | | | |
| AIR QUALITY PERMIT FEE (No Po | | | \$29.00 | | | |
| | nly if original permit is not expired, canceled, or co | mploted) | \$13.00 | | | |
| **You may not extend other applicants permi | | inpleteu) | 713.00 | | | |
| | AS/HEAT EXCHANGERS *Includes ven | iting & ducting | QTY | \$/EA | | |
| Install or Relocate of each Forced Air, Gra | | | , ,,, | \$29.00 | | |
| including 100,000 BTU/HR | , , , , , , , , , , , , , , , , , , , | - 1 | | , | | |
| Install or Relocate of each Forced Air, Gra | avity Type, Burner, or Gas Heat Exchange | r over | | \$34.00 | | |
| 100,000 BTU/HR | | | | | | |
| RESIDENTIAL HEATERS *Inclu | | | QTY | \$/EA | • | |
| Install or Relocate Suspended Unit Heate | r | | | \$29.00 | | |
| Install or Relocate Recessed Wall Heater | | | | \$29.00 | | |
| Install or Relocate Floor Mounted Furnac Install or Relocate Gas Fireplace insert | .e | | | \$29.00 \$29.00 | | |
| mistali di Nelocate das Firepiace msert | | | | γ ∠ઝ.υ∪ | | |

| Install or Relocate each Boiler, Steam or Hot Water Heat Exchanger up to including 100,000 BTU/HR; or Roof Top Units up to and including 3 Ton Install or Relocate each Boiler, Steam or Hot Water Heat Exchanger over 100,000 BTU/HR up to including 500,000 BTU/HR; or Roof Top Units over 3 Ton up to & including 15 Ton Install or Relocate each Boiler, Steam or Hot Water Heat Exchanger over 500,000 BTU/HR up to including 1,000,000 BTU/HR; or Roof Top Units over 15 Ton up to & including 30 Ton Install or Relocate each Boiler, Steam or Hot Water Heat Exchanger over 1,000,000 BTU/HR up to including 1,750,000 BTU/HR; or Roof Top Units over 30 Ton up to & including 50 Ton Install or Relocate each Boiler, Steam or Hot Water Heat Exchanger over 1,000,000 BTU/HR up to including 1,750,000 BTU/HR; or Roof Top Units over 30 Ton up to & including 50 Ton AIR TO AIR HEAT EXCHANGERS *Includes venting & ducting Air to Air Heat Exchanger or HRV Air Handling Unit or Fan Coil Unit up to including 10,000 (CFM) **NOTE: The above fees do not apply to air-handling units which are a portion of a factory assembled appliance, cooling termit is required elsewhere in the IMC Evaporative / Swamp Coolers *Excludes portable types VENTING/EXHAUST & COMBUSTION AIR DUCTING Install, Relocate or Replace each appliance vent OR combustion air vent For Each Ventilation Fan Connected to a Single Duct (i.e.: bath fans) For Each Ventilation System or ductwork which is not a portion of any heating or air conditioning system authorized by a permit. | QTY unit or evapor | \$29.00 \$29.00 \$48.00 \$64.00 \$99.00 \$/EA \$20.00 \$34.00 orative cooler for \$20.00 \$/EA \$13.00 |
|---|---|--|
| Roof Top Units up to and including 3 Ton Install or Relocate each Boiler, Steam or Hot Water Heat Exchanger over 100,000 BTU/HR up to including 500,000 BTU/HR; or Roof Top Units over 3 Ton up to & including 15 Ton Install or Relocate each Boiler, Steam or Hot Water Heat Exchanger over 500,000 BTU/HR up to including 1,000,000 BTU/HR; or Roof Top Units over 15 Ton up to & including 30 Ton Install or Relocate each Boiler, Steam or Hot Water Heat Exchanger over 1,000,000 BTU/HR up to including 1,750,000 BTU/HR; or Roof Top Units over 30 Ton up to & including 50 Ton AIR TO AIR HEAT EXCHANGERS *Includes venting & ducting Air to Air Heat Exchanger or HRV Air Handling Unit or Fan Coil Unit up to including 10,000 (CFM) Air Handling Unit or Fan Coil Unit over 10,000 (CFM) *NOTE: The above fees do not apply to air-handling units which are a portion of a factory assembled appliance, cooling the required elsewhere in the IMC Evaporative / Swamp Coolers *Excludes portable types VENTING/EXHAUST & COMBUSTION AIR DUCTING Install, Relocate or Replace each appliance vent OR combustion air vent For Each Ventilation System or ductwork which is not a portion of any heating or air conditioning system | unit or evapo | \$48.00 \$64.00 \$99.00 \$/EA \$20.00 \$34.00 orative cooler for \$20.00 \$/EA |
| Install or Relocate each Boiler, Steam or Hot Water Heat Exchanger over 100,000 BTU/HR up to including 500,000 BTU/HR; or Roof Top Units over 3 Ton up to & including 15 Ton Install or Relocate each Boiler, Steam or Hot Water Heat Exchanger over 500,000 BTU/HR up to including 1,000,000 BTU/HR; or Roof Top Units over 15 Ton up to & including 30 Ton Install or Relocate each Boiler, Steam or Hot Water Heat Exchanger over 1,000,000 BTU/HR up to including 1,750,000 BTU/HR; or Roof Top Units over 30 Ton up to & including 50 Ton AIR TO AIR HEAT EXCHANGERS *Includes venting & ducting Air to Air Heat Exchanger or HRV Air Handling Unit or Fan Coil Unit up to including 10,000 (CFM) **NOTE: The above fees do not apply to air-handling units which are a portion of a factory assembled appliance, cooling permit is required elsewhere in the IMC Evaporative / Swamp Coolers *Excludes portable types VENTING/EXHAUST & COMBUSTION AIR DUCTING Install, Relocate or Replace each appliance vent OR combustion air vent For Each Ventilation System or ductwork which is not a portion of any heating or air conditioning system | unit or evapo | \$64.00 \$99.00 \$/EA \$20.00 \$34.00 orative cooler for \$20.00 \$/EA |
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| For Each Ventilation Fan Connected to a Single Duct (i.e.: bath fans) For Each Ventilation System or ductwork which is not a portion of any heating or air conditioning system | | \$13.00 |
| For Each Ventilation System or ductwork which is not a portion of any heating or air conditioning system | | |
| | 1 | \$13.00 |
| | | \$20.00 |
| MISCELLANEOUS | QTY | \$/EA |
| Install, Relocate or Replace Wood Stove or Solid Fuel Appliance (includes chimney vent) | | \$58.00 |
| Environmental Health – Outside Air Stagnation zone / EPA approved wood Stove **Required Make and Model | | \$ 0.00 |
| Appliance or piece of Equipment regulated but the IMC but not in any above categories for which a fee is listed. I.e.: Generator | | \$20.00 |
| GAS & FUEL PIPING | QTY | \$/EA |
| Gas Piping 1-4 outlets | 1-4 | \$16.00 |
| Gas Piping over 4 per outlet | | \$ 8.00 |
| This issued permit becomes invalid unless the work authorized is commenced within 180 d after commencement of work if more than 180 days pass between inspections. It is the duty of the Contractor/Applicant or Owner to assure that all required inspections a and approved by the Missoula County Building Inspector. Furthermore, it shall be the duty coordinate & provide access to and means for the inspection of the work. A homeowner may secure a permit and plumb their own Primary Residential buildings for tused as rentals, businesses, etc. and all contract work must be performed by a licensed plu licensed plumbers. Hired plumber must sign & apply for their own permit. Reference MCA This permit was not reviewed for compliance with zoning, floodplain, or conditions of subd The individual who signs this application assumes all responsibility and liability for the work I hereby certify that I have read and examined this application and know the same to be true perform the electrical work in accordance with all <i>Title 50</i>, <i>Chapter 60</i>, <i>Section 5 MCA</i>. All pordinances governing this type of work will be complied with whether specified herein or in does not presume to give authority to violate or cancel the provisions of any other state or | their prival mbing con & ARM listivision apply to performedue and corpovisions tot. The grillocal law i | led 24hrs in a pection requeste use only. Entractor using sted below. Foroval. The das specified as specified as and agreed flaws and ranting of a pregulating |
| construction or the performance of construction and that I make this statement under pen ——————————————————————————————————— | alty of per | jury. DATE |

SIGNATURE OF MECHANICAL CONTRACTOR PRINT MECHANICAL CONTRACTOR DATE ***FOR OFFICE USE ONLY BELOW THIS POINT*** ADMIN FEE \$______ TOTAL FEES \$______ DATE:_______

□ CASH □ CHECK # () □ CREDIT/DEBIT CARD Authorization #