## Mechanical Permit Application: Residential



Submit to: <a href="mailto:eplans@cityofvancouver.us">eplans@cityofvancouver.us</a>

Questions?	360-487-7833	<u>ePlans</u>
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JOB	JOB SITE LOCATION Address: A maximum of two inspections are provided per permit.   Additional inspections will be subject to trip fee assessment.													
CAT	EGORY OF	CONST	RUC	τιον		Single Family			\ulti-Fan	nily [		essory B	uilding	
JOB VALUATION \$								PROJECT NAME						
DESCRIPTION OF SCOPE OF WORK														
EQUIPMENT C403.2.1 Calculation of Heating & Cooling Loads shall determine Equipment & System Sizing. See also C403.2.2 Output capacity.														
									If adding equipment that <u>weighs more than 400 pounds</u> provide either: Engineering or Original design documents showing that the equipment					
Requ	ired to <u>weigh</u>	less than e	<u>xisting</u>	or <u>not i</u>	ncrease	more than 5% IEBC	707.2	weights	were ac				posed placement.	
Exist	xisting Weight: New weight:				Installation location:			Weight:		Ins	Installation location:			
If adding or replacing any mechanical equipment: 2015 WSEC Mechanical forms are required. <u>http://waenergycodes.com</u>											<u>aenergycodes.com</u>			
HEA	TING & CO	OLING	_				ОТН	ER FUE	L APPL	IANCES				
	A/C or heat pump Du		Duct we	work			Water heater				Ň	Wood/pellet stove		
	Furnace <100,000 BTUS Hydro			Hydron	nic hot water system			Gas fireplace				1	Wood fireplace/insert	
	Furnace > 100,000 BTUS Unit he				ater			Flue vent water heater or gas fireplace			replace	(	Chimney/liner/flue/vent	
Gas heat pump Flue or vent La									Log lighter (gas)					
EXHAUST & VENTILATION									FUEL PIPING					
	Range hood or kitchen equipment				Single duct exhaust				Fuel Piping: 1-4 outlets					
Clothes dryer exhaust				Attic/crawl space fan				Fuel Piping: 5+ outlets (each)						
CONTRACTOR Business Name:								OWNER Name:						
Address: Cor					Contac	Contact:			Address:				Phone:	
City/State/Zip: Phone:								City/State/Zip:						
Emc	ıil:				WA St	ate License #:		Email:	Email:					
ELECTRONIC PLANS SUBMITTER (required) Name:								Phone:						
(res	ponsible for eP	lans uploa	ding 8	corres	pondenc	e) Email (required)	):							
For payment only - ePermits User Name (if existing account):														
REQUIRED SIGNATURES														
A complete application form, submittal documents and required information as set forth in VMC 17.08.100 must be submitted to obtain a permit. If it is determined that the application is not complete and/or the application fees have not been paid, the City may reject the application and plan review will not begin. It is the responsibility of the applicant/owner to comply with all private conditions, covenants and restrictions (CC&R's) associated with this property. As evidenced by my signature below, I/we agree that City of Vancouver staff has my/our full permission to enter upon the subject property at any reasonable time to consider the merits of the application, to take photographs and to post public notices.														
Applicant Signature: Date:														
Property Owner Signature: Date:														