PO Box 37	ormation. Your permit w on is not provided. Form mit button.	r, rmit appli- ill not be	Office use only Permit #: Submit Date: In-take staff: Issue Date: Related Permit Numbers Building Permit #: Plumbing Permit #: Electrical Permit #:
Proposed Work: New Constru PROPERTY OWNER: Name: Address:	uction Renovation		
Name:Address: Email: Contractor License #:			Phone:
Name:Address:			
Name:Address: Email: DESCRIPTION OF WORK:			Phone:
For new commercial projects ple Contractor Signature:	ase include: Load Ca	lculations	Equipment Specifications Date:
MECHANICAL PERMIT FEES: Valuation Added: \$	Total Valuation \$1.00 to \$1,000 \$1,001 - \$10,000 \$10,001 - \$50,000 \$50,001 - or more	\$75 for first \$ \$255 for first \$1	\$500 plus 6.0% of balance of construction 1,000 plus 2.0% of balance of construction 0,000 plus 0.5% of balance of construction 0,000 plus 0.3% of balance of construction
Office use onlyContractor License On FileBusiness License On File	Approved: <u>YES / NO</u> By:		Fee: