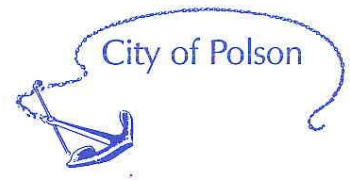




106 1st Street E., Polson, MT 59860
 406-883-8200 Fax 406-883-8238
 www.cityofpolson.com



APPLICATION FOR MECHANICAL PERMIT

I hereby make application for a permit to do mechanical work in accordance with all Title 50, Chapter 60, Section 104, MCA and ARM 24.301.172

All incomplete applications will be Returned Unprocessed

Owners Name: _____ Phone: _____
 Contractor and Business Name: _____ Phone: _____
 Contractor email address: _____
 Mailing Address: _____ City: _____ State: _____ Zip: _____
 Job Location: _____ City: Polson State: MT Zip: 59860

Type of Building	Type of Work	Project Value	\$ _____
_____ Multiple Family	_____ New		
_____ Commercial/Public	_____ Addition/remodel	Calculated Fee	\$ _____
_____ Accessory Building	_____ Alteration		
_____ Single Family Res.			
_____ Factory Building			
_____ Warehouse Building			

FEE SCHEDULE

Cost of Mechanical System Mechanical Permit Fee

\$0 - \$10,000	\$48 for 1 st \$1,000 + \$14 for each additional \$1,000 or fraction thereof
\$10,001 - \$50,000	\$166 for 1 st \$10,000 + \$9 for each additional \$1,000 or fraction thereof
\$50,001 or more	\$514 for 1 st \$50,000 + \$6 for each additional \$1,000 or fraction thereof

EXAMPLE : If Project value is \$9460 then \$48 for first \$1000 leaving \$8460 which is more than \$8000; the fraction thereof is \$9000, so 9 (\$1000 fractions) x \$14.00 = a total of \$126.00 + \$48.00 = \$174.00

Description of Work (check all that apply)

_____ Air Handling Unit	_____ Incinerator - commercial/industrial/ domestic
_____ Forced Air Furnace w/ ducts	_____ Mechanical Exhaust System; hood, ducts, etc.
_____ Repair; alteration/ addition to heating or cooling system	_____ Evaporator Cooler - New Install or Repair
_____ Ventilation System - not part of heating or cooling system	_____ Floor Furnace with attached vents
_____ Refrigeration Work - new or repair	_____ Compressor - New install or repair
_____ Venting for appliances	_____ Other
_____ Heaters - suspended, recessed wall, or floor mounted units	N/A Boiler - Boiler permits are processed through the state of Montana.
_____ Gas Piping - any type	
_____ Fireplace	

Signature: _____ Date: _____
 Printed Name: _____

Make all checks payable to: **The City of Polson**

NOTE: If the property cannot be identified your application will not be processed.

Mail To: City of Polson / 106 1st street East / Polson, MT 59860

PHONE (406) 883-8214 Forms can be submitted by email to bp@cityofpolson.com

New Form/ Rev. 0 - 08/21/2014