



Mechanical Permit Application

200 S. Whitley Drive, P.O. Box 324, Fruitland, ID 83619
 P: 208-452-4946 F: 208-452-6146

www.fruitland.org
bearles@fruitland.org

PROJECT ADDRESS: _____

CONTACT PERSON: _____ PHONE #: _____

PROPERTY OWNER

Name: _____
 Street Address: _____
 City: _____ State: _____ Zip: _____
 Phone Numbers: _____

MECHANICAL CONTRACTOR

Name: _____
 Street Address: _____
 City: _____ State: _____ Zip: _____
 Phone Numbers: _____

ID Contractor License # _____ Expires _____

PROJECT DESCRIPTION: _____ VALUE: \$ _____

New Construction Remodel Fixture Replacement

RESIDENTIAL

FEES

<ul style="list-style-type: none"> • New: Single Family Dwelling, including all buildings with HVAC being constructed on each property. *Based on living space (see definition below) <ul style="list-style-type: none"> <input type="checkbox"/> Up to 1,500 sq. ft. \$130 <input type="checkbox"/> 1,501 to 2,500 sq. ft. \$195 <input type="checkbox"/> 2,501 to 3,500 sq. ft. \$260 <input type="checkbox"/> 3,501 to 4,500 sq. ft. \$325 <input type="checkbox"/> Over 4,500 sq. ft. \$325 plus \$65 for each additional 1,000 sq. ft. or portion thereof Total Square Footage _____ \$325 + (\$65 x # of additional 1,000 sq. ft. or portion thereof) *Living Space - space within a dwelling unit intended for human habitation which may reasonably be utilized for sleeping, eating, cooking, bathing, washing, recreation, and sanitation purposes. An unfinished basement is considered part of the living space. 	\$ _____
<ul style="list-style-type: none"> • New: Multi-Family Dwelling (Contractors Only) <ul style="list-style-type: none"> <input type="checkbox"/> Duplex Apartment \$260 <input type="checkbox"/> Three or more multi-family units: \$130 per building plus \$65 per unit (\$130 x # of buildings) + (\$65 x # of units) 	\$ _____
<ul style="list-style-type: none"> <input type="checkbox"/> Existing Residence <input type="checkbox"/> Modular, Manufactured or Mobile Homes <input type="checkbox"/> Detached Shop \$65 + \$10 per piece of additional pieces of HVAC equipment (furnace, gas lines, pool heaters, mini-split system, hydronic system, etc.) and/or exhaust ducts (range hoods, dryer, exhaust fans, etc.). Fee shall not exceed 'New' square footage fee. Total Pieces of Equipment _____	\$ _____

MISCELLANEOUS

<input type="checkbox"/> Technical Service - Plan Check: \$65 per hour <input type="checkbox"/> Requested Inspection - Gas Line: \$65 <input type="checkbox"/> Fireplace: \$65	\$ _____
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COMMERCIAL / INDUSTRIAL

*The fees listed under this inspection type shall apply to any and all HVAC installations not specifically mentioned elsewhere on this form. Total cost of HVAC system (Contracted Amount): \$ _____ <input type="checkbox"/> Up to \$10,000: (total cost of system x 0.02) + 60 = \$ _____ <input type="checkbox"/> Between \$10,001 - \$100,000: (total cost of system - 10,000) x 0.01 + \$260 = \$ _____ <input type="checkbox"/> Over \$100,001: (total cost of system - 100,000) x 0.005 + \$1,160 = \$ _____	\$ _____
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TOTAL FEES: \$ _____

I agree to permit inspection of these heating, ventilation, and air conditioning installations by the City of Fruitland Building Official. I agree to conduct any required test of the installation as required by the International Mechanical or International Fuel Gas Codes and hereby certify that these installations herein designated are made by me, the residential property owner, and that I will assume responsibility for compliance with Title 54, Chapter 50, Idaho Code. Adopted by Resolution No. 2012-01.

Signature of Permit Holder: _____

Date: _____

Please E-mail Permit and Inspections: _____
 E-mail Address