

## COMMUNITY DEVELOPMENT DEPARTMENT

Code Administration Division 129 North Second Street, 2nd Floor Yakima, Washington 98901 Phone (509) 575-6126 • Fax (509) 576-6576 Email: codes@yakimawa.gov

MECHANICAL PERMIT APPLICATION

Permit#

Job Address:		Parcel Number:		
Project	Description:		<del>-</del>	
	ed cost of the work to be performed (materi			
(If cost of	of labor is not included, cost of materials will	be double	ed)	
<b>Property Owner</b>			Contractor	
Name:		Business Name:		
Address:			Address:	
City/State/Zip:			City/State/Zip:	
E-mail:			E-mail:	
Phone:			State Cont. Lic. #:	exp
	ione:		Phone:	
	ITEM	QTY.	ITEM	QTY.
	A/C Unit		Haz Piping outlets	
	Air Handler – CFM:		Heat Pump	
	Commercial Incinerator		Kitchen Exhaust Fan	
	Domestic Incinerator		LP Tank/Residential <125 gal	
	Dryer Vent		Miscellaneous:	
	Electric, Baseboard, or Suspended Heaters		Non Haz Piping outlets	
	Evaporative Cooler		Pellet Stove	
	Furnace/Heater – BTUs:		Repair/Alt./Addn. to a listed appliance:	
	Gas Boiler – BTUs:		Type I/II Commercial Hood	
	Gas Fireplace/Log/Heat Stove		Vent Fan (laundry, bath)	
	Gas Grill		Vent Systems	
	Gas Piping outlets		Wood Stove	
	Gas Range			
☐ I am a ( am legal ☐ I am an contract ☐ I am E) exemption to be pe I hereby information	contractor or special to perform the work sought by this permit a AUTHORIZED AGENT of the property owner and or as defined under RCW 18.27.010 and 18.27.110 a (EMPT from the requirements of the Contractor Re on as stated. I will do all of my own work or use all reprormed under the permit applied for herein.	all work wand is legall gistration lagistered and e State of and that the g	ill be done by the property owner or a properly y qualified to perform the work sought by this peaws, per RCW 18.27.090, and will abide by all ad licensed contractors and/or specialized contractors and with the washington that I have read and examined this granting of a permit does not authorize me in an	r licensed contractor or specialt rmit.  provisions and conditions of the ctors in connection with the works application and know that the year to violate or cancel any or the contract of th
	Signature		Print Name	Date