



CITY OF MANASSAS
DEPARTMENT OF COMMUNITY DEVELOPMENT
PLANNING & DEVELOPMENT
 9800 Godwin Drive
 Manassas, VA 20110
 Phone: 703-257-8278 Fax: 703-257-5831
www.manassasva.gov/permits
 Email: permitstatus@manassasva.gov

FOR STAFF USE ONLY

APPLICATION NUMBER _____
 BUILDING APPROVAL _____ APPROVAL DATE _____
 ZONING APPROVAL _____ APPROVAL DATE _____
 TOTAL OCCUPANCY _____ TOTAL PERMIT FEES \$ _____

MECHANICAL PERMIT APPLICATION

Property Information

Property Address _____ Subdivision / Project Name _____
 Tenant Name _____ Tenant Email Address _____ Tenant Phone Number _____

Project Information

New Addition Alteration/Repair Other _____ Construction Type: _____
 (Ex: 1a, 1b, 2a, 2b, 3a, 3b, 4a, 4b, 5a, 5b)
 Residential Non-Residential Use Group of Building: _____
 Has a building permit been submitted? Yes No If yes, please provide Building Permit Number _____
 Plans and Specifications attached Value of Work or Contract Cost: \$ _____ Is there a suppression system? Yes No

Project Description: _____

Applicant Information

Applicant Name _____ Applicant Email Address _____
 Applicant Address _____ Applicant Phone Number _____

Contractor Information

Contractor Name _____ Contractor Email Address _____
 Contractor Address _____ Contractor Phone Number _____
 State Contractor License Number _____ License Expiration Date _____ Classification _____
 City Business License Number _____ License Expiration Date _____ Applicant Waiver Provided
 * FEES WAIVED
 *Note: City Business License Number is required if office is located in City OR if work inside the City exceeds \$25,000 in a calendar year or per permit/job

Disclaimer and Signature

I hereby certify that I am the owner of record for the property listed on this application, or that have been authorized by the owner to make application as their authorized agent. I hereby certify that all information provided for the issuance of this permit is true and accurate and agree to conform to all applicable laws of the City of Manassas. For the work described in this application, I authorize the code official or their authorized representative to have the authority to enter areas covered by this permit at any reasonable time to inspect and enforce the provisions of the code.

Signature: _____ Date: _____

Using Fee Schedule, Include Quantity and Total Cost Where Applicable:

| | <u>Quantity</u> | | <u>Fee Total</u> |
|---|-----------------|---|------------------|
| Residential Mechanical Permit (R-5 Construction Type Only): | Flat Fee | \$100.00 | \$ _____ |
| All Other Mechanical (includes R2, R3, etc.): | | | |
| Total # Square Floor Building Area: _____ | | x \$.05 (\$150.00 minimum) | \$ _____ |
| Total # of Fire Damper: _____ | | x \$20.00 each | \$ _____ |
| Hot Water Heating or Supply Boiler | | | |
| Total Btu's: _____ | | \$90.00; Up to 200,000 Btu/hr | \$ _____ |
| Total Btu's: _____ | | x \$10.00 each additional 100,000 Btu/hr | \$ _____ |
| Unfired Pressure Vessels | | | |
| Total 50 sq. ft: _____ | | x \$60.00 for 50 sq. ft | \$ _____ |
| each additional 50 sq. ft: _____ | | x \$10.70 each | \$ _____ |
| Unit Heaters, Space Heaters, Through Wall Heat Pump or AC, Exhaust Fans (Other Than Hood Fans), Dryer Fans, VAV Fans and Fan Coil Units | | | |
| Total Units: _____ | | \$90.00 for first five | \$ _____ |
| Total Units: _____ | | x \$12.00 each additional unit | \$ _____ |
| Furnaces; When installed in each unit of apartment buildings | | \$30.00 each unit | \$ _____ |
| Central Heating Furnaces | | | |
| Total Btu's: _____ | | \$90.00; Up to 200,000 Btu/hr | \$ _____ |
| Total Btu's: _____ | | x \$7.00 each additional 100,000 Btu/hr | \$ _____ |
| Other Furnaces | | | |
| Total Btu's: _____ | | \$53.50; Up to 100,000 Btu/hr | \$ _____ |
| Total Btu's: _____ | | x \$5.35 each additional 100,000 Btu/hr | \$ _____ |
| Incinerator | | | |
| Total # of lbs.: _____ | | x \$60.00 per 100 lbs. | \$ _____ |
| Refrigeration and Refrigeration Cycle of Air Conditioning Systems | | | |
| Total # of tons: _____ | | \$90.00 up to 5 refrigeration tons | \$ _____ |
| Total of each additional refrigeration ton: _____ | | x \$5.00 each | \$ _____ |
| Conversion to or Replacement of Oil Burner | Flat Fee | \$90.00 | \$ _____ |
| Installation, Repair or Replacement of All Other Mechanical Equipment | | | |
| Total cost of work: \$ _____ | | 1.5% of the cost of the work, including equipment, labor and materials; (\$100.00 minimum) | \$ _____ |
| Commercial Elevator Installation | Flat Fee | \$400.00 | \$ _____ |
| Residential Elevator Installation | Flat Fee | \$195.00 | \$ _____ |
| | | TOTAL FEES | \$ _____ |