



CITY OF TUMWATER
 555 ISRAEL RD. SW, TUMWATER, WA 98501
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 (360) 754-4180

**COMMERCIAL MECHANICAL PERMIT
 Submittal Checklist**

TUM -	DATE STAMP
RCVD BY	

APPLICANT INFORMATION *(please print neatly)*

NAME OF APPLICANT: _____ EMAIL: _____

SUBJECT PROPERTY INFORMATION

ADDRESS OF PROPERTY (COMPLETE): _____

In order to install or repair commercial mechanical equipment, except for commercial kitchen hood, you must submit a completed permit application and all items on this checklist unless modified or waived by Staff. Note: Mechanical equipment being installed in new construction is covered under the main building permit. Separate mechanical permits will not be issued.

A. PERMIT APPLICATION	Provided	Staff
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1. Provide a complete and signed (by owner or authorized representative) application and applicable fee. Note: Payment of the plan check fee is required at the time of application.	<input type="checkbox"/>	<input type="checkbox"/>
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B. PLANS	Provided	Staff
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1. Provide two copies of all plans and two copies of all specifications. Draw plans to scale of 1/4" = 1' or larger. Minimum plan sheet size is 18"x24". All notations and drawings must be clear and legible.	<input type="checkbox"/>	<input type="checkbox"/>
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C. SITE PLAN <small>(Applies only if mechanical units are located outside the building perimeter)</small>	N/A	Provided	Staff
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1. Provide two copies of the site plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Draw plan to scale of 1" = 10' or larger.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Show:			
a. Applicable zoning including zoning of adjacent properties.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. North arrow: and locations and dimensions of all property lines and easements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Distances from structure(s) and mechanical unit(s) to property lines.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D. MECHANICAL PLAN	N/A	Provided	Staff
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1. Provide a layout of all duct work on all levels.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Specify on the plans if the system utilizes a return air plenum ceiling.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Provide unit specifications and installation requirements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. If HVAC or other mechanical equipment is located on the roof or supported by the roof, provide engineering calculations for the loads imposed on the structure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Commercial Fire Sprinkler Permit Submittal Checklist

E. ELECTRONIC SUBMITTAL	N/A	Provided	Staff
1. Compact disc (CD) or USB drive containing all of the plans, reports, etc. as outlined under B through D above, in PDF-file format. Maximum format shall be 300 dpi. Note: Please do not include the application or submittal checklist in electronic format.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I verify that all required documents associated with this application have been submitted.

Signature of Applicant

Date