



Lincoln County

Building Division

210 SW 2nd St

Newport, OR 97365

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(541) 265-4192 Fax (541) 265-6945

RESIDENTIAL MECHANICAL PERMIT APPLICATION DEPARTMENT USE ONLY	
Permit No:	
Date Issued:	By:

WORK SITE LOCATION:

PARENT PERMIT NUMBER: (Building)	
STREET ADDRESS OF WORK SITE:	
CATEGORY OF CONSTRUCTION:	
<input type="radio"/> One/Two Family <input type="radio"/> Manufactured home	
TYPE OF WORK:	
<input type="radio"/> New <input type="radio"/> Addition <input type="radio"/> Alteration/Repair	<input type="radio"/> Gas line only <input type="radio"/> Accessory Structure
PROJECT DESCRIPTION:	

APPLICANT:		
Name:		
Full Mailing Address:		
City:	State:	Zip:
Phone:		
Email:		
PROPERTY OWNER:		
Same as applicant? <input type="radio"/> Yes <input type="radio"/> No		
Name:		
Full Mailing Address:		
City:	State:	Zip:
Phone:		
Email:		
CONTRACTOR INSTALLATION		
Same as applicant? <input type="radio"/> Yes <input type="radio"/> No		
Business Name:		
Address:		
City/State/Zip:		
Phone:	Fax:	
E-mail:		
CCB license no.:		City Lic No.:
REQUIRED DOCUMENTS FOR APPLICATION		
I have downloaded and reviewed the plans and documents Checklist (Initials): _____		
SUBMITTAL METHOD FOR PLANS AND DOCS		
<input type="radio"/> Paper <input type="radio"/> Electronic <input type="radio"/> Not applicable		

NOTICES

Expiration of application: This application is valid for 180 days after it has been accepted as complete.

Inspections Required: Approved County inspections must be completed before the work is performed is enclosed.

TERMS AND CONDITIONS

Correct Information: I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be compiled with whether specified herein or not.

Copyright release for government entities: I hereby grant permission to the County of Lincoln to copy, in whole or part, drawings and all other materials submitted by me, my agents, or representatives. This grant of permission extends to all copies needed for administration of the County's regulatory, administrative, and legal functions, including sharing of information with other governmental entities.

Indemnity: I, the permit applicant, shall indemnify, defend and hold harmless the County of Lincoln, its officers, employees and agents from any and all claims arising out of or in connection with work done under this permit. Owner installation: This installation is being made on residential or farm property owned by me or a member of my immediate family. This property is not intended for sale, exchange, lease, or rent. OAR 479.540(1) and 479.560(1).

Owner permission: I have the legal right or permission from any property owner whose property is affected by the work covered under this permit to: 1) enter the property; 2) perform the work covered under this permit; 3) leave structures on or in the affected property. The issuance of this permit shall not be construed as permission or a grant of a legal right to enter upon or remain on any property affected by the work covered under this permit.

Electronic signature certification: By attaching an electronic signature (whether typed, graphical or free form) I certify herein that I have read, understood and confirm all the statements listed above and throughout the application form.

I agree (initials): _____

