



IT ALL HAPPENS HERE™

200 E Broadway, Hobbs, NM 88240 (575)-391-8158

COMMERCIAL MECHANICAL/PLUMBING PERMIT APPLICATION

All separate structures and services require individual permits

Permit No. _____ Issued Date: _____ Check one: Mechanical _____ Plumbing _____ New _____ Remodel _____ Valuation: \$ _____	Contractor: _____ Address: _____ City: _____ State: _____ Zip: _____ Phone: _____ NM Lic: _____ Email: _____
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Job Address: _____ Owner's Name: _____ Address: _____ Phone No: _____	<table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Quantity</th> <th colspan="2" style="text-align: right;">Fees</th> </tr> </thead> <tbody> <tr><td>_____ Each Gas Wall Heater</td><td style="text-align: right;">\$ 4.00</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____ Each Gas Pipe Outlet</td><td style="text-align: right;">\$ 4.00</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____ Each Other Gas Unit</td><td style="text-align: right;">\$ 4.00</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____ Each Solar Space Heating System</td><td style="text-align: right;">\$20.00</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____ Each Vacuum Breaker or Back Flow Device</td><td style="text-align: right;">\$ 4.00</td><td style="text-align: right;">\$ _____</td></tr> <tr><td>_____ 4" Sewer Tap</td><td style="text-align: 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COMMERCIAL FEES

Note:
 1. Projects bigger than a four-plex on a single lot shall be considered as commercial.
 2. Re-inspection fees are \$60.00 and shall be paid before next inspection or final inspection.
 3. Any item requiring electrical work must have electrical permit.
 4. For plan review: If Mechanical/Plumbing plans are not submitted with building plans a 20% of permit fee will be charged.

Quantity	Fees	
1 Administrative Fee	\$37.50	\$ 37.50
_____ Each Duct Work Systems	\$10.00	\$ _____
_____ Each Evaporative Coolers	\$ 6.00	\$ _____
_____ Package Units	\$50.00	\$ _____
_____ Air Handler	\$30.00	\$ _____
_____ Gas Furnace	\$20.00	\$ _____
_____ Each Fan Coil Unit	\$ 4.00	\$ _____
_____ Condenser A.C.	\$15.00	\$ _____
_____ Condenser H.P.	\$20.00	\$ _____
_____ Each Refrigeration System	\$ 6.00	\$ _____
_____ Each Steam & Condensate Piping	\$10.00	\$ _____
_____ Each Water Heater Appliance	\$ 4.00	\$ _____
_____ Each Swimming Pool/Spa	\$50.00	\$ _____
_____ Each Combination Unit (HVAC)	\$ 4.00	\$ _____
_____ Each Cooling Tower	\$10.00	\$ _____
_____ Each Medical Gas System	\$10.00	\$ _____
_____ Each Central Furnace	\$ 4.00	\$ _____
_____ Each Commercial Duct System	\$20.00	\$ _____
_____ Each Gas Piping System	\$ 6.00	\$ _____
_____ Each Gas Yard Line	\$ 4.00	\$ _____
_____ Each Gas Appliance	\$ 4.00	\$ _____

Total Fees Paid \$ _____ Received By: _____ Date: _____ Ck _____ Cash _____ Other _____

I, _____ as the Contractor, hereby agree to comply under this permit with all City, State and Federal codes.

Contractor's Signature _____ Date _____

All applications must be signed.