



RESIDENTIAL CONVEYANCE PERMIT

A separate Permit Application is required for each conveyance.

Permit # _____	This area is to be completed by EIP Office	Permit Extension
Permit Expiration Date _____		Extended Expiration Date _____
Date Issued _____		Updated Scope: Yes No
Receipt# _____ Date Paid _____		Receipt # _____
Permit Fee _____		Date Paid _____ Extension Fee _____
Approval Signature _____		Approval Signature _____

** Permits expire in one year for new installations and six months for alterations **
Permit extensions must be applied for prior to permit expiring or a new permit may be required
Changes to code in effect at time of permit extension and/or changes to scope may require a new permit

Job Address _____	City/Town: _____	Zip: _____
Job Name _____		
Job Mailing Address _____		
Job Phone # _____	Email _____	

Elevator Company _____	State License Number _____
Mailing Address _____	
Phone # _____	Email _____

NEW INSTALLATION (ALL items in this box required)

____ Building Permit # _____	____ Jurisdiction _____	____ Bldg Official _____
____ Circle one: Hydraulic - Roped Hydraulic – Traction/Electric – Lift – Other _____		
____ Number of stops		
____ Plans/Drawings submitted with this Permit Application		

ALTERATION – Detailed Scope of Work must be submitted with this Permit Application

____ Building Permit # _____	____ Jurisdiction _____	____ Bldg Official _____
____ IF no building permit is required - submit confirmation document from building department		
____ Plans/Drawings submitted with this Permit Application		

NOTICE

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 complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Licensed Contractor Signature Date

Conveyance plan review and field inspections will be conducted by NWCCOG Elevator Inspection Program.

Schedule acceptance inspections by emailing NWCCOG at Elevator@NWCCOG.org

An approved Permit does not constitute approval on final inspection.

PRIVATE RESIDENCE FEES

Private residence elevator - Flat fee = \$750

Extension Fee = \$187

Requested residential inspection or alteration acceptance (non-mandatory per AHJ but available upon request) = \$350 per hour

Note for after permit issued: Acceptance test failure = \$375

(If multiple conveyances are included in a valuation; divide per conveyance and calculate percentage)

TOTAL FEE _____

PAYMENT: Credit/Debit Card or Electronic Check -

www.nwccog.org/programs/elevator-inspection-program

Created 04/2025