



Application for Mechanical Permit

PRINT IN INK or TYPE your responses.

PROJECT TITLE			MECHANICAL CONSTRUCTION VALUATION		
ADDRESS			ANTICIPATED START DATE		
CITY OR TOWNSHIP WHERE LOCATED *** PLEASE VERIFY ***		COUNTY	STATE PROJECT NO		
OWNER (OR STATE AGENCY IF APPLICABLE)			CONTACT PERSON		
ADDRESS			PHONE		
CITY	STATE	ZIP CODE	FAX		
MECHANICAL CONTRACTOR			PROJECT CONTACT		
ADDRESS			PHONE		
CITY	STATE	ZIP CODE	FAX		
STATE MECHANICAL BOND NUMBER			E-MAIL		
DESIGN FIRM			PROJECT CONTACT		
ADDRESS			PHONE		
CITY	STATE	ZIP CODE	FAX		
Permit Applicant is: <input type="checkbox"/> Owner <input type="checkbox"/> Designer <input type="checkbox"/> Contractor <input type="checkbox"/> Other (specify)					
APPLICANT (Other)			PHONE		
ADDRESS			FAX		
CITY	STATE	ZIP CODE	E-MAIL		
Class of Work is: <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Other (specify)					

PROJECT DESCRIPTION:

Applicant: I completed the information on this application and acknowledge that this is not a **mechanical** permit. Work will be performed in accordance with the conditions of the permit, the approved plans and specifications, and the Minnesota State Building Code. Work will not begin until the building permit has been issued by this office.

APPLICANT NAME (PRINT)	APPLICANT SIGNATURE	DATE
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Is this project on the State "MAPS" accounting system? Yes No State Agency that will be paying fee?

Calculated Permit Fees (By Applicant)		FOR OFFICE USE ONLY		
A Mechanical Permit fee must be submitted. Please see the Building Permit Fee Schedule Worksheet for correct calculation of fees for the mechanical permit and state surcharge.	Permit Fee	Project No.	Date	Amount of Check
	Surcharge Fee			

This material can be made available in different forms, such as large print, Braille or on a tape. To request, call 1-800-342-5354 (DIAL-DLI) Voice or TDD (651) 297-4198.