



Application for Mechanical Permit

For plumbing see www.dli.mn.gov/CCLD/PlanPlumbing.asp

PROJECT INFORMATION

PROJECT TITLE			MECHANICAL CONSTRUCTION VALUATION
PROJECT LOCATION (number and street name)			ANTICIPATED START DATE
PROJECT CITY or TOWNSHIP (Enter only city or township, not both)		COUNTY	INITIAL APP PROJECT NO BLD-
OWNER (OR STATE AGENCY IF APPLICABLE)			CONTACT PERSON
ADDRESS			PHONE
CITY	STATE	ZIP CODE	E-MAIL
MECHANICAL CONTRACTOR			PROJECT CONTACT
ADDRESS			PHONE
CITY	STATE	ZIP CODE	
STATE MECHANICAL BOND NUMBER			E-MAIL
DESIGN FIRM			PROJECT CONTACT
ADDRESS			PHONE
CITY	STATE	ZIP CODE	E-MAIL

CLASS OF WORK

Class of Work is: New Addition Alteration Other (specify)

PROJECT DESCRIPTION:

APPLICANT INFORMATION

Permit Applicant is: Owner Designer Contractor Other (specify)

APPLICANT (Other)			PHONE
ADDRESS			
CITY	STATE	ZIP CODE	E-MAIL

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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Calculated Permit Fees (By Applicant)	FOR OFFICE USE ONLY		
Please see: www.dli.mn.gov/CCLD/PlanConstructionCalc.asp for correct calculation of the required surcharge and mechanical permit fee. <input type="checkbox"/> Check (enclosed)	Permit Fee	Date	Amount of Check
	Surcharge Fee	Invoice #	Check #
Invoice <input type="checkbox"/> to Owner <input type="checkbox"/> to Contractor <i>Invoice option delays permit issuance until payment is received</i>	Total Fee	Returned check	BLD -

This material can be made available in different forms. To request, call 1-800-342-5354 (DIAL-DLI).