

Minnesota Department of Labor and Industry Construction Codes and Licensing Division 443 Lafayette Road North St. Paul, MN 55155 Phone: (651) 284-5026

www.dli.mn.gov

For Office Use Only			
Amount of Check:	Check Number:	Permit Number: ELE	

REQUEST FOR ELECTRICAL PERMIT CONTRACTOR Existing Multi-Family Dwelling

Fields marked with an asterisk * are required. Incomplete, inaccurate, illegible forms may be returned to the submitter.				* TODAY'S DATE			
illegible forms may be retur	neu to t		T INE	CODMATION			
*Project Location (Number and name of street)				*Project County			
*Project City OR Township (Enter City if within city limits – Enter Township if outside city limits – DO NOT ENTER BOTH)					*Project Zip		
*Project Description (Scope of worl	k, service s	ize, quantity of feeders	and ci	rcuits, job numbers, or other	vital information)		
Job Reference: *Rough-in Required Yes No			Speci	al Access Instructions			
Directions to project site	- 1						
* Owner Name	* Owner Phone			er Cell	Owner E-mail		
*Owner Address			*Ow	ner City	*Owner State	*Owner Zip	
License Type (check one): Electrical Contractor (EA)		Reg	ristered Employer (ER)	*Contractor License Number			
*Contractor Name				*Contractor Contact Person			
*Contractor Address			*Cor	ntractor City	*Contractor State	*Contractor Zip	
*Contractor Phone *Contractor Email				Electrical Utility Company			
Site Contact Name Site Contact Compa		any (if different than Contractor)		*Site Contact Phone			
Alternate Contact Company Al		Alternate Contact Name		Alternate Phone	Alternate Contact Email		
F	EES – EX	ISTING ELECTRICA	L SER	VICE / MULTI-FAMILY D	WELLING		
GRAND TOTAL of fees and surch	arge (fron	n Line 24 of Inspection	on Fee	Worksheet – see page 2)			
MN Dep		or and Industry,	443	(GRAND TOTAL) to: Lafayette Road N., St.			

Contractor Inspection Fee Worksheet for Existing Multi-Family Dwelling

The minimum fee for each separate inspection is \$35. The fees below represent our best estimate of the minimum fees required based on the information you provide, and the most common fees charged. These calculated fees may not accurately represent all the required inspection fees. Any fee discrepancies will be reviewed by the inspector and you will be billed for the difference. Fees are determined by Minnesota Statute 326B.37.

Line #	Item Description	Quantity	Fee	Total
1	Number of inspection trip(s) needed or required		\$35/inspection trip	

The inspection fees are determined by the number of inspections indicated above OR by lines 2 through 16 below

Sei	rvices, Ge	nerators, other Power Sources and feeder or	branch circuits to separate str	uctures.	
2	0 to 400) Amps Power Source(s)	\$35/source		
3	401 - 80	00 Amps Power Source(s)	\$60/source		
4	Over 80	0 Amps Power Source(s)	\$100/source		
5	000 S	0 to 400 Amps Power Source(s)	\$70/source		
6	Over 600 Volts	401 - 800 Amps Power Source(s)	\$120/source		
7	0	Over 800 Amps Power Source(s)	\$200/source		
	C	Circuits within Dwelling Units (including the fo	eeder to the dwelling unit)		
8	Units with less than 10 circuits installed/modified: Total number of circuits for all units. \$6 each				
9		r of Units where over 9 circuits installed/modified.	\$70/dwelling unit		
10	Units w Total nu	\$6 each			
11	Reconn	Reconnected Existing Circuit or Feeder (for panelboard replacements) \$2 each			
		Other Inspection Fe	es		
12	Commo				
13	Separat	e bonding inspection(s)	\$ 35/inspection		
14	Transfo	rmer(s) rated up to 10KVA	\$ 15/transformer		
15	Transfo	rmer(s) rated in excess of 10KVA	\$ 30/transformer		
16	Outdoo	r Parking Lot lighting Standard(s)	\$ 5/standard		
17	Power S	Supplies for Signs & Outline Lighting	\$ 5/power supply		
18	Technol				
19		ADD lines 2 THRU 18 above and enter the subtotal.			
		Minimum Required Inspec	ction Fee		
20		Please enter the large	st amount from line 1 OR 19 above.		
21	The Minimum fee for one inspection is \$35.			\$35.00	
		Calculate Fees Belo	w		
22	Please enter the largest amount from line 20 or 21.				
23	Required permit surcharge			\$1.00	
24	GRAND TOTAL is the fee calculated by adding lines 22 and 23 above. Enter Inspection Fee total here and on Page 1 – GRAND TOTAL amount.				

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