

City of Richfield
Mechanical Permit Application

Office use only

Job Site Address: _____ Unit # _____ Tenant/Bldg Name _____

Project Valuation: \$ _____ The Applicant Is: Owner and Occupant Contractor
TOTAL PROJECT VALUATION TO INCLUDE ALL MECHANICAL EQUIPMENT AND LABOR NECESSARY FOR JOB COMPLETION, WHETHER FURNISHED BY CONTRACTOR, OWNER OR OTHERS

Property Owner	
Name _____	
Address _____ Unit # _____	
City _____ State _____ Zip _____	
Phone () _____	

Contractor/Applicant	
Name _____	
Address _____	
City _____ State _____ Zip _____	
Phone () _____ License # _____	

Property Use	Type of Work	
<input type="checkbox"/> Single Family Residential <input type="checkbox"/> Duplex* <i>*(separate permit required for each unit)</i> <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Institutional	<input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Remodel/Alteration <input type="checkbox"/> Repair/Replace <input type="checkbox"/> Furnace <input type="checkbox"/> Air Conditioner	<input type="checkbox"/> Furnace/Air Conditioner <input type="checkbox"/> Airport Noise Mitigation <input type="checkbox"/> Refrigeration <input type="checkbox"/> Electrical Contractor _____

Mechanical Item(s) (check all that apply)			
<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Furnace	<input type="checkbox"/> Refrigeration	<input type="checkbox"/> Minor Appliance
<input type="checkbox"/> Boiler	<input type="checkbox"/> Piping - Gas	<input type="checkbox"/> Rooftop Unit	<input type="checkbox"/> Other _____
<input type="checkbox"/> Chimney / Flue	<input type="checkbox"/> Piping - Medical	<input type="checkbox"/> Space / Unit Heater	
<input type="checkbox"/> Ductwork	<input type="checkbox"/> Piping - Oil	<input type="checkbox"/> Temporary Heating Unit	
	<input type="checkbox"/> Piping - Steam / Hot Water	Temp. L.P. Tank	
		<input type="checkbox"/> Ventilation	

Specific Description of Work to be Completed

This permit may be issued only to a licensed mechanical contractor or to an owner who occupies the single-family dwelling. A duplex is not a single-family dwelling. (City Code 400.10)

I hereby apply for a mechanical permit and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes of the City of Richfield and with the Minnesota Mechanical Code.

Applicant's Signature	Date
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Mechanical Permit Fees	Conditions of Issuance
Mechanical Permit Fee: _____ Plan Review Fee: _____ Additional Inspection: _____ State Surcharge: _____ Investigation Fee: _____ TOTAL FEES DUE: _____	<p style="text-align: center;"><i>(office use only)</i></p> _____ _____ _____ _____ Approved by: _____ Date: _____

Required Inspections	Fees
<input type="checkbox"/> Final <input type="checkbox"/> No Insp. Req'd <input type="checkbox"/> Orsat <input type="checkbox"/> Gas Line Air Test <input type="checkbox"/> Rough-In Ductwork <input type="checkbox"/> Investigation <input type="checkbox"/> Questions at Site <input type="checkbox"/> Equipment Start-Up Test <input type="checkbox"/> Temp C/O <input type="checkbox"/> Routine	<p><u>RESIDENTIAL: ONE & TWO FAMILY DWELLINGS</u> 1.5% of jobcost Minimum of \$35.00 (Includes one inspection) <i>Each Additional Inspection: \$35.00</i></p> <p><u>COMMERCIAL, INDUSTRIAL, MULTI-FAMILY</u> 1.5% of jobcost Minimum of \$45.00 (Includes one inspection) <i>Each Additional Inspection: \$35.00</i></p> <p><i>Plan Review 10% of permit fee when the job cost exceeds \$50,000</i></p> <p><u>SURCHARGE</u> - .0005 X Total Jobcost</p>



City of Richfield
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Revised 2/24/10