

CITY OF SCANDIA

14727 209th St N., Scandia MN 55073 651-433-2274 fax 651-433-5112

Mechanical Permit Application

Permit number (assigned by City): _____ Date issued _____

Project Address: _____

Owner: _____ Phone _____

Address: _____

Contractor: _____

MN Statute requires anyone working at the business of G/HVACR be licensed, have a \$25,000 Bond and file with the DOLI License Division. Contractor name should be how it appears on the Bond List from DOLI License Division.

Purpose of permit: _____

(Air conditioner or furnace replacement, installation of commercial appliances, basement/bathroom finish, etc...)

Description of Project: _____

Estimated Valuation (include labor and material): _____

Name [please print]: _____

Signature: _____ Date: _____

Notice: The applicant, upon signing this form, is responsible for work being done to the minimum of the 2015 MN Building Code which references the IMC and the IFGC.

Phone number to contact when permit is issued: _____

NOTICE: Separate permits are required for electrical work and installation of septic systems. 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.

Permit Fee \$ _____

State Surcharge Fee \$ _____

Other \$ _____

TOTAL \$ _____

BUILDING OFFICIAL SIGNATURE: _____