



1245 W Hwy 96 * Arden Hills MN 55112
 Phone 651.792.7800 * Fax 651.634.5137
 Email: CD@cityofardenhills.org

Permit # _____

MECHANICAL PERMIT APPLICATION

For Office Use Only:

Date Submitted: _____
 Additional Materials: Yes No
 Date Applicant Notified _____

Licensing Requirements:
 All contractors must hold a current City contractor's license **AND** present a copy of their state surety bond.

Property Information			
Property Address:		Bldg./Suite/Location (commercial projects only):	
Owner Name:		Owner Phone Number:	
Email Address:	City:	State:	Zip:

Applicant/Contractor Information			
Applicant Type: <input type="checkbox"/> Primary Owner (Owner Affidavit Form Required) <input type="checkbox"/> Contractor; License # _____			For Office Use Only <input type="checkbox"/> Verified
Company Name (contractors only):		Company Email Address:	
Mailing Address:	City:	State:	Zip:
Contact Name:	Contact Office Phone Number:	Contact Cell Number:	

Property Use	Construction Type
<input type="checkbox"/> Commercial <input type="checkbox"/> Public <input type="checkbox"/> Single Family	<input type="checkbox"/> A/C <input type="checkbox"/> Boiler <input type="checkbox"/> Fireplace <input type="checkbox"/> Furnace <input type="checkbox"/> Furnace/A/C <input type="checkbox"/> Gas Line <input type="checkbox"/> New <input type="checkbox"/> Repair <input type="checkbox"/> Temporary Heat <input type="checkbox"/> Ventilation <input type="checkbox"/> Other***

Project Details

Describe Work (*If "Other***" has been selected this section must be completed:*)

Heating Plant Make:	Model	Capacity:	Expected Completion Date:
Air Cond. Plant Make:	Model	Capacity:	Project Value: (including labor and materials) \$

IMPORTANT NOTICE: Applicant must attach 1 site plan and 2 sets of building plans for all applications requiring plan review. Min. 24 hour notice required for all inspections. There is a 10 working day turnaround for all permits requiring plan review. Separate permits are required for electrical, plumbing, heating, ventilation, or air conditioning. This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work has commenced. By signing this application, you hereby certify that you have read and examined this application and know the same to be true and correct. All provision 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. Applicant takes full responsibility for all work performed. Applicant is responsible for all plan check fees if permit is cancelled or withdrawn.

 Applicant Signature

 Date

FEES	Permit Fee - Residential (2% of project value with the minimum permit fee of \$75)	\$
	Permit Fee Commercial/Public 1.50% of project value plus minimum fee of \$80	\$
	Plan Check Fee 65% of permit fee (if applicable)	\$
	State Surcharge .0005 x PROJECT VALUE	\$
	TOTAL PERMIT FEE ► (Min. Permit Fee \$75 + surcharge)	\$ 0.00