MECHANICAL PERMIT APPLICATION

CITY OF CLOQUET

OWNER:

PERMIT NUMBER:

(Applicant to Complete Numbered Spaces Only)

JOB ADDRESS				
1. LEGAL DESCR.	LOT	BLOCK	TRACT	PARCEL CODE NO. 06-
2 OWNER	MAIL ADDRESS	ZIP	PHONE	
3 CONTRACTOR	MAIL ADDRESS	PHONE		
4 ARCHITECT OR DESIGNER	MAIL ADDRESS	PHONE		

5 USE OF BUILDING ◯ RESIDENTIAL ◯ COMMERCIAL ◯ INDUSTRIAL ◯ PUBLIC ◯ OTHER (DESCRIBE BELOW)

6 CLASS OF WORK ◯ NEW ◯ ADDITION ◯ ALTERATION ◯ REPAIR

7 DESCRIBE WORK:

SPECIAL CONDITIONS:

APPLICATION ACCEPTED BY:	PLANS CHECKED BY:	APPROVED FOR ISSUANCE BY:

NOTICE

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. 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.

(Signature of Contractor) (Date)

(Signature of Owner - If Builder) (Date)

PERMIT FEES

NO.	Type of Fixture or Item	Fee	
	FURNACE $		
	<100,000 BTU/h @ $15 each		
	>100,000 BTU/h @ $25 each		
	BOILER		
	<100,000 BTU/h @ $15 each		
	>100,000 BTU/h @ $25 each		
	COMPRESSOR		
	<100,000 BTU/h @ $15 each		
	>100,000 BTU/h @ $25 each		
	ABSORPTION UNIT		
	<100,000 BTU/h @ $15 each		
	>100,000 BTU/h @ $25 each		
	AIR HANDLER		
	<10,000 cfm @ $15 each		
	>10,000 cfm @ $25 each		
	HEAT EXCHANGER		
	<10,000 cfm @ $15 each		
	>10,000 cfm @ $25 each		
	EVAPORATIVE COOLER/CENTRAL		
	AIR CONDITIONER @ $15 each		
	INCINERATOR @ $20 each		
	MISCELLANEOUS @ $15 each		
	STATE SURCHARGE	1	00
	BASE PERMIT FEE $	25	00
	(101-32-322-0-2225) TOTAL FEE $		

PERMIT VALIDATION

PERMIT NUMBER_____

PERMIT ISSUED_____

APPROVED BY: _____

BUILDING OFFICIAL