

2021



**COMMUNITY DEVELOPMENT DEPARTMENT • PHONE: 651-792-7080**  
**2660 CIVIC CENTER DR. • ROSEVILLE, MN 55113**  
**COMMERCIAL MECHANICAL PERMIT APPLICATION**

APPLICATION DATE: \_\_\_\_\_ PERMIT NUMBER: \_\_\_\_\_

<b>WORK PROPOSED:</b>	<input type="checkbox"/> New	<input type="checkbox"/> Alteration	<input type="checkbox"/> Fireplace
-----------------------	------------------------------	-------------------------------------	------------------------------------

**SITE ADDRESS:** \_\_\_\_\_

<b>APPLICANT:</b>	Name: _____	Phone: _____
-------------------	-------------	--------------

Address: \_\_\_\_\_

<b>OWNER:</b>	Name: _____	Phone: _____
---------------	-------------	--------------

Address: \_\_\_\_\_

<b>CONTRACTOR:</b>	Name: _____	Phone: _____
--------------------	-------------	--------------

City Contractor License #(required): CON- \_\_\_\_\_

Mechanical Bond #(required): \_\_\_\_\_

**VALUATION** (labor & materials):     \$ \_\_\_\_\_

**WORK DESCRIPTION:**

\_\_\_\_\_

\_\_\_\_\_

**Acknowledgement and Signature:**

The undersigned hereby makes application to the City of Roseville to perform the work as herein described. The undersigned further states, under penalty of law, that the work will be performed in accordance with the Minnesota State Building Code, this application, and any approved plans and/or specifications. Some or all of the information that you are asked to provide on the application is classified by State law as either private, public, or confidential. The data will constitute a public record if and when the permit is issued.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Contractor     Applicant    Phone: \_\_\_\_\_ Date: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**OFFICE USE ONLY:**

<b>Fees</b> (see second page for mechanical fee schedule): Bolded are mandatory fees, along with any applicable				<b>Total Fees:</b>
<b>Permit</b>	\$ _____	<b>Mech. Bond Verification Fee</b>	\$ _____	<b>\$ _____</b>
<b>Processing Fee</b>	\$ _____	<b>\$1.00 (contractors only)</b>		
<b>\$2.00 Minimum or 2% of Permit Fee</b>	\$ _____	<b>Contractor's License</b>	\$ _____	
<b>State Surcharge</b>	\$ _____	<b>Other:</b> _____	\$ _____	<b>Receipt #:</b>
				_____
				<b>Receipt Date:</b>
				_____

**Approval:**

Plan Reviewer \_\_\_\_\_ Date \_\_\_\_\_

**Requests for permit refunds must be made within 180 days of permit issuance date.**

## **MECHANICAL PERMIT FEE SCHEDULE**

- **All commercial work is \$61.00 Plus 1.28% of valuation cost of job**
- **Verification of Current Mechanical State Bond fee - \$1.00**
- **State Surcharge For permits based on job valuation - \$1.00 minimum or by fee table as set by §326B.148**
- **Processing Fee - \$2.00 minimum or 2% of permit fee**