



# APPLICATION FOR MECHANICAL PERMIT

CITY OF HUTCHINSON

111 Hassan St SE

Hutchinson, MN 55350

Phone: 320-234-4216 Fax: 320-234-4240

*Office Use Only*

Date: \_\_\_\_\_ Building Permit No.: \_\_\_\_\_ Mechanical Permit No.: \_\_\_\_\_

City PID No. : \_\_\_\_\_ Lot No.: \_\_\_\_\_ Block No.: \_\_\_\_\_

Addition: \_\_\_\_\_

Address of Property: \_\_\_\_\_

Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Owner (of property): \_\_\_\_\_ Phone: \_\_\_\_\_

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

Mechanical contractor responsible for installing system: \_\_\_\_\_

Address \_\_\_\_\_ MN Bond \_\_\_\_\_

Bus Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Bond Exp Date \_\_\_\_\_

Property Use: Commercial  Residential

NO.	TYPE OF FIXTURE OR ITEM		NO.	TYPE OF FIXTURE OR ITEM
	Air Conditioning			Space / Unit Heater
	Boiler			Ventilation
	Ductwork			Gas Log
	Factory Fireplace			Water Heater
	Furnace			Commercial Kitchen Exhaust
	Piping – Fuel			(Other)
	Rooftop Unit			

**Required Inspections:**  Rough-In  Above Ceiling  Gas Piping  Venting  Duct  
 Progress  Insulation  Rated Assembly  Underground

**Residential Appliance Replacement** (\$30.00 Insp. + \$30.00 Admin. = \$60.00) .....\$ \_\_\_\_\_

State Surcharge ( \$1.00) for Appliance Replacements .....\$ \_\_\_\_\_

**Commercial Replacement or Residential New Construction/Addition** - Please use the following

Mechanical Fee..... \$ \_\_\_\_\_ (Valuation) x 1.25 % ....(Minimum Fee \$60.00).... \$ \_\_\_\_\_

Surcharge Fee.....\$ \_\_\_\_\_ (Valuation) x .0005..... \$ \_\_\_\_\_

**TOTAL MECHANICAL PERMIT FEES** ..... \$ \_\_\_\_\_

Furnace Efficiency Rating: \_\_\_\_\_ BTU Input \_\_\_\_\_

This permit may become 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 is commenced.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FOR INSPECTIONS CALL 320-234-4216**

This is an application only. Permit will be issued after City review and payment of fees.

**Authorized Approval Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_