



Application Number: _____

Related Records: _____

Olmsted County Planning Department

Inspections Division

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Rochester, MN 55904

P: 507-328-7100 F: 507-328-7958

planningweb@olmstedcounty.gov

MECHANICAL PERMIT APPLICATION

Mandatory Submittal Information

Site Address:

Township/Section	Subdivision	Block	Lot	Parcel

Permit Type: Residential Commercial

Applicant (select one): Property Owner Contractor/Professional Other (describe):

Scope of Work

Describe project in detail:

Property Owner

Full Name: Phone: Email:

Address:

Contractor/Other

Company Name: Phone: Email:

Contact Name: State License Number: Exp. Date:

Address:

Designer/Engineer

Company Name: Phone: Email:

Contact Name: RegistrationNumber: Exp. Date:

Address:

Work Category

New Alterations Move/Relocate Addition Tenant Finish Repair/Replace

Valuation of Materials & Labor

Total Valuation of Work (materials and labor):

Application Number: _____

Related Records: _____

Equipment Provided

Make	Model No.	Combustion Air Size	Fuel	Flue Diameter	Input (BTU)	CFM	Tons	Number of Units

System Type: Ventilation/Exhaust

Chimney Liner Flue Diameter

Bathroom/Water Closet Compartment

Commercial/Industrial

Domestic Kitchen Hood

Commercial Kitchen Hood

Dryer/Laundry Room

Habitable Rooms/Public Corridors

Other:

Other:

Disclaimer and Signature

I hereby apply for a mechanical permit and I acknowledge that the information above is complete and accurate. The work will be in conformance with applicable laws of the State of Minnesota. I understand this is not a permit but only an application for a permit and work is not to start without a permit. I acknowledge that the work will be in accordance with all permit conditions and approved plans (in the case of work which requires a review and approval of plans).

Applicant Signature:

Date: