

MECHANICAL PERMIT APPLICATION

333 S. Washington Street · PO Box 526 · Redwood Falls, MN 56283 Office: 507-616-7400 · Fax: 507-637-2417 inspections@ci.redwood-falls.mn.us

PROPERTY INFORMATION											
Property Address											
Property Owner											
Email Address							Phone				
APPLICANT/ CONTRACTOR INFORMATION											
Applicant Type: Property Owner Contractor Bond #											
Applicant/ Company Name											
Address											
Email Address							Phone				
PR	ROJECT TY	PE	CONSTRUCTION TYPE			_	WORK TYPE				
	Single-Fami	ily		New Construction			Furnace			Gas Water Heater	
	Residential			Alteration			RTU			Gas Unit Heater	
	Multi-Family	/		Replacement			Boiler			Gas Piping	
	Residential			Other			Gas Firepl	ace		Air Conditioner	
Commercial		1					Wood Fire	Wood Fireplace		Other	
SYSTEM INFORMATION											
	Natural Gas			LP Gas	Electric		Fuel Oil	U Wood		D Other	
System		Make		Mode	I	Сарас	ty/ Size	Efficiency		CFM	
Heating											
Air Cond											
Water Heater											
Ventilation	า										
Estimated Value of Work (Include Labor)											
Description of Work											
APPLICATION - NOT A VALID PERMIT UNTIL PROCESSED											
I hereby apply for a building permit and I acknowledge that the information provided above and on the submitted site plan is complete and accurate and that all work will be in conformance with the approved plan and the ordinances and codes of the City of Redwood Falls and with the Minnesota State Building Codes. The person doing the work authorized by a permit shall provide notification that the work is ready for inspection and shall provide access to and means for inspection of the work.											
Applicant Signature								Date			