

**CITY OF SHOREVIEW**

4600 Victoria Street North  
Shoreview, MN 55126  
City: 651-490-4600  
Fax: 651-490-4696

**Building Inspection Line:  
651-490-4685**

**COMMERCIAL  
MECHANICAL PERMIT**



For Heating, Ventilation, Air Conditioning, Refrigeration, Gas, and Oil  
(Do not use this form for RESIDENTIAL INSTALLATIONS)

Site Address \_\_\_\_\_

Tenant \_\_\_\_\_ Tenant Phone \_\_\_\_\_

Contractor \_\_\_\_\_ Contractor Phone \_\_\_\_\_

Contractor's Address \_\_\_\_\_ FAX \_\_\_\_\_

**Minimum Twenty-Four (24) Hour Notice Required For Inspections.**

“X” BELOW WORK COVERED BY THIS PERMIT

Piping For:

- Gas       Hot Water Heater
- Oil       Refrigeration
- Steam       Other

Duct Installation For:

- Heating
- Ventilation \_\_\_\_\_
- Air Conditioning
- Other \_\_\_\_\_

Indicate Duct Type and Linear Feet: \_\_\_\_\_

List each Furnace, Boiler, Unit Heater, Roof Top Unit, Gas Burner, Oil Burner, Air  
Conditioner, Refrigeration Unit or Equipment to be Installed:

No. of Units	Type of Equipment	Make	Capacity

Total Cost of Installation Including Labor, Material, and Cost of Equipment: \$ \_\_\_\_\_

**Note: Minimum Fee is \$35.00  
+ .50¢ State Surcharge.**

Multiply Times 1.5%: \$ \_\_\_\_\_

Subtotal Fee: \$ \_\_\_\_\_

State Surcharge (Multiply .0005 x Total Cost of Labor and Materials): \$ \_\_\_\_\_

Total Fee: \$ \_\_\_\_\_

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