

CITY OF SHOREVIEW

4600 Victoria Street North
Shoreview, MN 55126
City: 651-490-4600
Fax: 651-490-4696
www.shoreviewmn.gov

**COMMERCIAL
MECHANICAL PERMIT**



Building Inspection Line: 651-490-4685

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 (48) 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: \$ _____

Multiply Times 1.5% (Minimum Fee \$35.00): \$ _____

Subtotal Fee: \$ _____

State Surcharge (Multiply .0005 x Cost of Labor and Materials or \$.50, whichever is greater): \$ _____

Total Fee: \$ _____

Signature of Applicant: _____ Date: _____