

Residential Heating Application

City of Shoreview

4600 North Victoria Street

Shoreview, MN 55126

(651) 490-4600 / Fax 651-490-4696



Licensing

Requirements:

All contractors must have
Current bond filed with State

Parcel Address:

Owner Name: _____ Phone No: _____

Owner Address: _____ City, State, Zip _____

Contractor Name:

Bond #

Address: _____ Phone No: _____

City, State, Zip: _____ Contact Name: _____

Email address: _____

Part A INSTALLATION / QUANTITY	FEE	Part B GAS PIPING INSTALLATION (\$20.00)
FURNACE _____ X \$35.00=_____		QUANTITY FURNACE _____
BOILER _____ X \$35.00=_____		BOILER _____
FIREPLACE _____ X \$35.00=_____		HEATING APPLIANCE _____
HEATING APPLIANCE _____ X \$35.00=_____		OVEN / COOKTOP _____
AIR CONDITIONERS* _____ X *\$30.00=_____		DRYER _____
HRV Heat Exchange _____ X \$35.00=_____		FIREPLACE / GAS LOG / LOG LIGHTER _____
WARM AIR DUCT System _____ X \$35.00=_____		HOT WATER HEATER _____
HOT WATER PIPING _____ X \$35.00=_____		OTHER: _____
PART A TOTAL: _____		PART B TOTAL _____ X \$20.00=_____

SUB TOTAL (A & B) _____

SURCHARGE **\$1.00**

TOTAL FEE \$

Minimum Permit Fee \$36.00 (\$35+\$1 surcharge)

By signing this application, you hereby certify that you have read and examined this application and know the same to be true and correct. All provision of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Applicant Signature

Date

CALL FOR INSPECTIONS 651-490-4685