

MECHANICAL PERMIT APPLICATION

Permit Number: _____

Site Information

Site Address:			Date:
<input type="checkbox"/> Manufactured	<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial	PID #:

Property Owner

Name:	Address:
Phone:	City:
Email:	State/Zip:

Contractor

Company Name:	License #:
Contact:	Address:
Phone:	City:
Email:	State/Zip:

Project Information

<input type="checkbox"/> New	<input type="checkbox"/> Ductwork	<input type="checkbox"/> Air Conditioning Only	Quantity: _____
<input type="checkbox"/> Replace	<input type="checkbox"/> Exhaust	<input type="checkbox"/> Furnace Only	Quantity: _____
<input type="checkbox"/> Alteration	<input type="checkbox"/> Hot Water Boiler	<input type="checkbox"/> Furnace and Air	Quantity: _____
<input type="checkbox"/> Repair	<input type="checkbox"/> In Floor Heat	<input type="checkbox"/> Fireplace	Quantity: _____
	<input type="checkbox"/> New Home HVAC	<input type="checkbox"/> Roof Top Unit	Quantity: _____
	<input type="checkbox"/> Refrigeration	<input type="checkbox"/> Unit Heater	Quantity: _____
	<input type="checkbox"/> Steam Boiler	<input type="checkbox"/> Kitchen Hood	CFM: _____
	<input type="checkbox"/> Ventilation	<input type="checkbox"/> Gas Piping to:	

Project Description:	Valuation (Required):
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A mechanical permit applicant shall be deemed the contractor and shall possess a mechanical bond as required by State Statute. However, if the applicant owns a single family home upon which the work is being done, the applicant may obtain a permit for construction and sign the Property Owner Waiver.

The undersigned hereby represents upon all of the penalties of the law, for the purpose of including the City of Cambridge to take action upon the herein request, that all statements are true and that all work herein will be done in accordance with the ordinances of the City of Cambridge and the State of Minnesota.

Applicant Signature:	Date:
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Kitchen exhaust hoods over 300 cfm require make up air calculation.

For permit submission requirements, corresponding handouts, and current fee schedule, please visit ci.cambridge.mn.us.

Office Use Only - Required Inspections

<input type="checkbox"/> Final Mechanical	<input type="checkbox"/> Grease Duct Cleance	<input type="checkbox"/> Refrigeration Test
<input type="checkbox"/> Rough In Mechanical	<input type="checkbox"/> Grease Duct Leakage	<input type="checkbox"/> Other:
<input type="checkbox"/> Gas Line Air Test	<input type="checkbox"/> Orstat Test	

Permit Approved By:	Date:
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