

# Commercial Mechanical Permit Application

**This form must be completed – in its entirety –  
and uploaded to the Documents Folder in Project Dox.**



| Property Information  |                          |                          |                           |
|---|--------------------------|--------------------------|---------------------------|
| <b>Property Address</b>                                       |                          |                          |                           |
| <b>Suite/Tenant</b>   |                          |                          |                           |
| Property Owner/Tenant Information                             |                          |                          |                           |
| <b>Name</b>   |                          |                          |                           |
| <b>Email</b>  |                          |                          |                           |
| <b>Phone</b>  |                          |                          |                           |
| Contractor Information  |                          |                          |                           |
| <b>Company Name</b>   |                          |                          |                           |
| <b>Address</b>  |                          |                          |                           |
| <b>Contact Person</b>   |                          |                          |                           |
| <b>Contact Person Email</b>                                   |                          |                          |                           |
| <b>Contact Person Phone</b>                                   |                          |                          |                           |
| Project Information   |                          |                          |                           |
| <b>Is this a State building or a State-licensed facility?</b> |                          |                          |                           |
| <b>Permit Type</b>  |                          |                          |                           |
| <b>Work Type</b>  |                          |                          |                           |
| <b>Detailed description of work</b>                           |                          |                          |                           |
| <b>Choose ALL that apply</b>                                  | <input type="checkbox"/> | Gas Piping (qty ____)    | <input type="checkbox"/>  |
|   | <input type="checkbox"/> | RTU (qty ____)           |                           |
| <input type="checkbox"/>                                      | A/C (qty ____)           | <input type="checkbox"/> | HRV or ERV (CFM ____)     |
| <input type="checkbox"/>                                      | Type I Hood (qty ____)   | <input type="checkbox"/> | Furnace/Boiler (qty ____) |
| <input type="checkbox"/>                                      | Type II Hood (qty ____)  | <input type="checkbox"/> | In Floor Heat             |
| <input type="checkbox"/>                                      | Unit Heater (qty ____)   | <input type="checkbox"/> | Duct Work                 |
| <input type="checkbox"/>                                      | Other:                   | <input type="checkbox"/> | Make Up Heater (qty ____) |
| <input type="checkbox"/>                                      |                          | <input type="checkbox"/> | Fireplace, gas (qty ____) |
| <input type="checkbox"/>                                      |                          | <input type="checkbox"/> | Refrigeration (qty ____)  |
| <b>Valuation \$</b>   |                          |                          |                           |

**Separate permits are required for electrical, plumbing, and building work**

(OVER)

**Please Note:**

- **Fuel Gas Piping:** A city license and state bond is required. These projects must use a mechanical permit application.
- **Medical Gas:** A copy of state license must be provided to the city. See also the installation guide at [minnetonkamn.gov](http://minnetonkamn.gov).
- A shower pan inspection is required for all custom tile showers.
- Sewer/Water can only be done by a licensed contractor. These projects require a separate Sewer/Water permit application.

**Permit Fees.** Fees are based on the valuation of the work being proposed. Valuation includes materials, equipment and labor cost to complete the project. When materials, labor, or installation will be furnished by another party, the reasonable market value of those items must be included in the valuation.

| TOTAL VALUATION      | FEE   |
|----------------------|---|
| \$1 to \$1,000       | \$77 for residential permits, \$98.50 for commercial permits                                      |
| \$1,001 to \$5,000   | \$77 for residential permits, \$98.50 for commercial permits plus 2.98% of the value over \$1,300 |
| \$5,001 to \$10,000  | \$170 plus 2.70% of the value over \$5,000  |
| \$10,001 to \$25,500 | \$309 plus 2.35% of the value over \$10,000   |
| \$25,001 to \$50,000 | \$677 plus 2.14% of the value over \$25,000   |
| \$50,001 and over    | \$1,234 plus 1.8% of the value over \$50,000  |

Other fees, including plan review fees, re-inspection fees, and state surcharges may apply. Please see the Fees Schedule at [minnetonkamn.gov](http://minnetonkamn.gov) for more information.

**Acknowledgment**

By applying for a mechanical permit, you acknowledge that the information submitted is complete and accurate; that the work will be in conformance with the ordinances and codes of the city of Minnetonka and with the Minnesota State Building Codes; that you understand this is not a permit but only an application for a permit and work is not to start without a permit; that the work will be in accordance with the approved plan in the case of all work which requires review and approval of plans.