CITY OF MOORHEAD BUILDING CODES

500 CENTER AVENUE / PO BOX 779 / MOORHEAD, MINNESOTA 56561

PHONE: 218.299.5424

E-MAIL: buildingcodes@moorheadmn.gov

MECHANICAL PERMIT APPLICATION								
CLA	SSIFICATION OF WO	RK: □	Residential		Multiple		Commercial	Industrial
SITE	Project Title							
	Project Site Address							
OWNER	Owner						Contact Person	
	Owner Address						Phone Number	
	City, State, Zip						Fax Number	
CONTRACTOR	Contractor						Contact Person	
	Contractor Address						Phone Number	
							Email	
Ö	City, State, Zip						Fax Number	License Number (If Applicable)
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Valuation of Work \$								
Brief Description of Work:								
Delivery of Permit (check one): Mail Fax Pickup Email								ail
Fax Number for Permit Delivery:								
Email Address for Permit Delivery:								
I hereby apply for a Mechanical Permit and acknowledge that the information above is complete and accurate; that this is not a permit; that the work will be performed in accordance with the conditions of the permit, the approved plans and specifications, and the Minnesota State Building Code; and, that I will cause the work to remain accessible and exposed for inspection purposes.								
Applicant Signature						Date		
				· <u> </u>		· <u> </u>		