



# Application for Mechanical Permit -- Fireplace

7800 Golden Valley Road, Golden Valley, MN 55427-4588  
 Phone: (763) 593-8090 Fax: (763) 593-3997 TTY: (763) 593-3968

**Date** \_\_\_\_\_ **Permit No.** \_\_\_\_\_

<b>Site Address</b>		<b>Suite #</b>
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**Applicant: Owner** \_\_\_\_\_ **Contractor** \_\_\_\_\_

<b>Property Owner</b>	Name _____ Address _____ City _____ State _____ Zip _____ Phone: _____
<b>Contractor</b>	Company _____ Address _____ City _____ State _____ Zip _____ Phone: _____ Fax: _____ E-Mail _____ Contact Person _____ Cell: _____ Contractor License # _____ Expiration Date _____

<b>Mechanical (Fireplace) Permit Type:</b>	<input type="checkbox"/> 60 - Masonry <input type="checkbox"/> 61 - Factory Built Fireplace <input type="checkbox"/> 63 - Factory Built Stove <input type="checkbox"/> 62 - Gas Log <input type="checkbox"/> 65 - Gas Line <input type="checkbox"/> 64 - Gas Insert <input type="checkbox"/> 53 - Gas Piping (Material _____) <input type="checkbox"/> - Gas by Others
<b>Fuel:</b>	<input type="checkbox"/> 40 - Gas <input type="checkbox"/> 41 - Wood
<b>Work Type:</b>	<input type="checkbox"/> 80 - New <input type="checkbox"/> 81 - Remodel/Alt. <input type="checkbox"/> 83 - Repair
<b>Fireplace:</b>	Make _____ Model _____ Number of Fireplaces _____ Location of Fireplace (s) _____ Gas Line Yes ___ No ___ Testing Agency and No. _____ Combustion Air Provided ___ Clear To Combustibles ___ “
<b>Conversion</b>	Insert _____
<b>Factory Built Chimney:</b>	Make _____ Type _____ Testing Agency and No. _____ Size _____ Total Height _____ Used to Vent: Wood ___ Gas ___
<b>Conversion</b>	Liner _____ Size _____
<b>Office Use</b>	<input type="checkbox"/> 01 - Rough-In <input type="checkbox"/> 11 - Gas Line AirTest at end of test
<b>Required Inspections</b>	<input type="checkbox"/> 02 - Final <input type="checkbox"/> 21 - Gas Line AirTest at start of test

(over)

Estimated Value of Work \$ \_\_\_\_\_

<b>Fees</b>	
Fireplace	\$ _____
State Surcharge	\$ _____
<small>(State Surcharge is Value X .0005)</small>	
<b>TOTAL</b>	\$ _____

**This permit shall be null and void if authorized work is not started within 180 days or if work is suspended or abandoned for 180 days or more after work is started.**

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

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**

**Permit Approved By:**

**Date Approved:**

\_\_\_\_\_

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This document is available in alternate formats upon a 72-hour request. Please call 763-593-8006 (TTY: 763-593-3968) to make a request. Examples of alternate formats may include large print, electronic, Braille, audiocassette, etc.

