

City of Minot

Inspections Department

Mechanical Permit Application

Minot Code of Ordinances: Chapter 17

GENERAL INFORMATION

Office Address: 1025 31st St SE
 Mailing Address: PO Box 5006
 Minot, ND 58702
 Email: inspection@minotnd.org
 (701) 857 - 4102

Owner _____ Address _____

Phone _____ Email _____

Mechanical Contractor _____ Phone _____ Email _____

TYPE OF STRUCTURE: SF TH CD APT COMM

CLASS OF WORK: New Addition Alteration Replacement

DUCTWORK INCLUDED: Yes No

TYPE OF EQUIPMENT: State Number of Each		VALUATION RANGE: Check One	
_____	Forced Air Systems	\$0 - \$1,000	\$50
_____	Air Conditioning Units	\$1,001 - \$2,500	\$65
_____	Fireplaces	\$2,501 - \$5,000	\$95
_____	Rooftop Units	\$5,001 - \$10,000	\$120
_____	Boilers	\$10,001 - \$20,000	\$150
_____	Radiant in Floor Heat	\$20,001 - \$40,000	\$200
_____	MUA	\$40,001 - \$60,000	\$250
_____	Unit Heaters	\$60,001 - \$80,000	\$315
_____	Range Hoods (Commercial)	\$80,001 - \$100,000	\$420
_____	Air Handling Units	\$100,001 - \$200,000	\$550
_____	Solid Fuel Stoves	Over \$200,000	\$2.75 per \$1,000
_____	Grills		
_____	Dryer Venting		
_____	Bath Fan Venting		
_____	Chimney ONLY/Liner		
_____	Total Units		

Total Mechanical Fee _____

GAS PIPING FIXTURES TO BE INSTALLED: (State Number of Units in Blanks Below)

_____	Furnaces	_____	Boilers	_____	Fireplaces	_____	Water Heaters
_____	Grills	_____	Ranges	_____	RTU	_____	Air Test
_____	MUA	_____	Unit Heaters	_____	Dryer	_____	Other
Total Gas Piping Units Installed _____				Total Gas Piping Fee _____			
Grand Total _____							
Gas Piping \$10.00 per fixture				Minimum \$50.00			

Office Use Only		
Permit Number	Receipt Number	Date Received
Approved _____	Denied: _____	
Reviewer Signature: _____		



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I certify that the fixtures listed above shall be installed in accordance with the International Fuel Gas Code and the International Mechanical Code and all applicable ordinances of the City of Minot, ND.
I also certify that the value of the work performed falls within the dollar range stated above.

Signature of Contractor

Date

I also certify that I am the owner of a single family dwelling located at the above address.

Signature of Owner

Date