

# FOUNDATION PERMIT APPLICATION METROPOLITAN AIRPORTS COMMISSION

6040-28<sup>th</sup> AVENUE SOUTH  
MINNEAPOLIS, MN 55450-2799  
612-467-0425(ph) 612-713-7440(fx)

OFFICE USE ONLY

PERMIT NUMBER: \_\_\_\_\_

PROJECT NUMBER: \_\_\_\_\_

DATE: \_\_\_\_\_ MAC NUMBER: \_\_\_\_\_

SITE ADDRESS: \_\_\_\_\_

PROJECT VALUATION/BID AWARD AMOUNT \$: \_\_\_\_\_

MAC PROJ. MANAGER NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

APPLICANT IS:  CONTRACTOR  ARCHITECT  ENGINEER  OTHER

## PROPERTY OWNER/TENANT NAME

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

FAX NUMBER: \_\_\_\_\_

## CONTRACTOR NAME

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ ST \_\_\_\_\_ ZIP CODE \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

FAX NUMBER: \_\_\_\_\_

## ARCHITECT/ENGINEER NAME

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP CODE \_\_\_\_\_

CONTACT PERSON \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

FAX NUMBER: \_\_\_\_\_

REGISTRATION NUMBER \_\_\_\_\_

CLASS OF WORK (CHECK ONE ONLY)  NEW  ADDITION  ALTERATION/REMODEL  MAINTENANCE/REPAIR/REPLACE

## TYPE OF STRUCTURE-CHECK ONE ONLY

- OFFICES, BANKS, PROFESSIONAL
- STORES, RESTAURANTS, WAREHOUSE
- HOTELS, MOTELS
- PARKING GARAGE
- OTHER NON HOUSEKEEPING SHELTER
- INDUSTRIAL BUILDINGS
- PUBLIC WORKS/UTILITIES BUILDING

- CHURCHES/RELIGIOUS BUILDINGS
- HOSPITAL AND INSTITUTIONAL BUILDINGS
- SERVICE STATIONS/REPAIR GARAGE
- RECREATIONAL, AMUSEMENT
- OTHER NON-RESIDENTIAL
- FENCES, SIGNS, ANTENNAS
- OTHER NON-BUILDING STRUCTURES

PLEASE COMPLETE OTHER SIDE

DESCRIPTION OF WORK: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DOES PROJECT INVOLVE FOOD, BEVERAGE, VENDING STORAGE/PREPARATION?  YES  NO

*I HEREBY APPLY FOR A FOUNDATION PERMIT AND I ACKNOWLEDGE THAT THE INFORMATION ABOVE IS COMPLETE AND ACCURATE; THAT THE WORK WILL BE IN CONFORMANCE WITH THE ORDINANCE AND CODES OF THE METROPOLITAN AIRPORTS COMMISSION AND WITH THE MINNESOTA BUILDING CODES; THAT I UNDERSTAND THIS IS NOT A PERMIT BUT ONLY AN APPLICATION FOR 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*

APPLICANT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

OFFICE USE ONLY

OFFICE VALUATION (EXCLUDING LANDS): \_\_\_\_\_

NUMBER OF UNITS: \_\_\_\_\_ NUMBER OF BUILDINGS: \_\_\_\_\_

SPRINKLED:  YES  NO TYPE OF CONSTRUCTION: \_\_\_\_\_

OCCUPANCY GROUP (S): \_\_\_\_\_

SETBACKS: FRONT: \_\_\_\_\_ REAR: \_\_\_\_\_ SIDE: \_\_\_\_\_

STORIES: \_\_\_\_\_ SQUARE FT: \_\_\_\_\_ HEIGHT: \_\_\_\_\_

LENGTH: \_\_\_\_\_ WIDTH: \_\_\_\_\_

PARKING SPACES REQUIRED: \_\_\_\_\_ HANDICAP SPACES REQUIRED: \_\_\_\_\_

NUMBER OF SAC UNITS: \_\_\_\_\_ SAC LETTER REC'D FROM METROPOLITAN COUNCIL:  YES (ATTACH COPY)  NO

REQUIRED INSPECTIONS:

Certificate of Occupancy	Floor Slab	Roofing
Consultation	Footing	Sheet Rock
Drain Tile	Insulation	Site
Final	Framing	Other
Fire Stopping	No Inspections Required	Other
Firewall	Plan Review	Other

CONDITIONS OF ISSUANCE: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

FEE INFORMATION:

PERMIT FEE:  YES  NO PLAN REVIEW FEE  YES  NO INVESTIGATION FEE  YES  NO SAC FEE  YES  NO

ADDITIONAL INSPECTION FEE:  YES  NO ADDITIONAL PLAN REVIEW FEE:  YES  NO

PERMIT FEE \$: \_\_\_\_\_ PLAN REVIEW FEE \$: \_\_\_\_\_ INVESTIGATION FEE \$: \_\_\_\_\_

SAC FEE \$: \_\_\_\_\_ ADDITIONAL INSPECTION FEE \$: \_\_\_\_\_

ADDITIONAL PLAN REVIEW FEE \$: \_\_\_\_\_ TOTAL PERMIT FEE \$: \_\_\_\_\_

PERMIT APPROVAL LIST ROUTED:  YES  NO DATE: \_\_\_\_\_

PERMIT APPLICATION APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

PERMIT PROCESSED BY: \_\_\_\_\_ DATE: \_\_\_\_\_