HVAC PERMIT APPLICATION
METROPOLITAN AIRPORTS COMMISSION
6040-28TH AVENUE SOUTH
MINNEAPOLIS, MN 55450
612-467-0425 (ph)  612-713-7440 (fx)

OFFICE USE ONLY
PERMIT NUMBER:

DATE:________________________________________ MAC #:____________________________________

SITE ADDRESS:______________________________________________________________________________

Job Cost: $____________________________________________________________________________________

APPLICANT IS:  □ CONTRACTOR  □ ARCHITECT  □ ENGINEER  □ OTHER

PROPERTY OWNER/TENANT NAME

NAME:_____________________________________________________________________________________

ADDRESS:__________________________________________________________________________________

CITY:________________________________________ ST_____________ZIP CODE:________________________

CONTACT PERSON:____________________________ PHONE NUMBER:______________________________

CONTRACTOR

NAME:_____________________________________________________________________________________

ADDRESS:__________________________________________________________________________________

CITY:________________________________________ ST_____________ZIP CODE:________________________

CONTACT PERSON:____________________________ PHONE NUMBER:______________________________

License Number_______________________________ FAX NUMBER:________________________________

ARCHITECT/ENGINEER

NAME:_____________________________________________________________________________________

ADDRESS:__________________________________________________________________________________

CITY:________________________________________ ST_____________ZIP CODE:________________________

CONTACT PERSON:____________________________ PHONE NUMBER:______________________________

FAX NUMBER:________________________________

REGISTRATION NUMBER__________________________

Class of Work  □ 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
Fill in the appropriate blanks and check the correct boxes in the tables below:

<table>
<thead>
<tr>
<th>MAKE</th>
<th>MODEL NUMBER</th>
<th>CONNECTIVITY</th>
<th>FUEL</th>
<th>FLUE DIAMETER</th>
<th>INPUT (BTU)</th>
<th>CFM</th>
<th>TONS</th>
<th>HP</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**MECHANICAL ITEM(S)**

- AIR CONDITIONING
- BOILER
- CHIMNEY/FLUE
- DUCTWORK
- FACTORY FIREPLACE
- FURNACE
- PIPING – GAS
- PIPING – MEDICAL
- PIPING – OIL
- PIPING – STEAM/HOT WATER
- REFRIGERATION
- ROOFTOP UNIT
- SPACE/UNIT HEATER
- TEMPORARY HEATING UNIT
- VENTILATION
- OTHER

**GAS/OIL UNITS (INSTALL OR REPLACE)**

- NUMBER OF UNITS UP TO 500,000 BTU
- NUMBER OF UNITS OVER 500,000 BTU
- FUEL OIL TANKS
- NON-FUEL OIL TANKS
- NO. OF TANKS
- NO. OF TANKS
- NO. OF BURIED
- NO. OF BURIED
- NO. ABOVE GROUND
- NO. ABOVE GROUND
- NO. WITH PIPING
- NO. WITH PIPING
- NO. TEMP. TANKS
- NO. TEMP. TANKS

**MISCELLANEOUS GAS PIPING**

- NUMBER OF UNITS:

**FEES - 2% OF JOB COST**

**DESCRIPTION OF WORK**

_______________________________________________________________________________________________________________________________

_______________________________________________________________________________________________________________________________________

**DOES PROJECT INVOLVE FOOD, BEVERAGE, VENDING STORAGE/ PREPARATION?**

□ YES  □ NO

**I HEREBY APPLY FOR A HEATING, VENTILATION AND AIR CONDITIONING 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/MECHANICAL CODES; THAT I UNDERSTAND THIS 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 A REVIEW AND APPROVAL OF PLANS.**

**APPLICANT’S SIGNATURE**

______________________________________________________________________________

**DATE**

**OFFICE USE ONLY**

**CONDITIONS OF ISSUANCE:**

______________________________________________________________________________

**OTHER FEES?**  □ YES  □ NO  PLEASE SPECIFY ________________  AMOUNT $____________

**PERMIT APPLICATION APPROVED BY:** ___________________________  **DATE:** __________

**PERMIT PROCESSED BY:** ___________________________  **DATE:** ______________