

# MECHANICAL PERMIT APPLICATION\*

**OFFICE OF BUILDING AND HOUSING    HIBBING CITY HALL**  
**Telephone (218) 262-3486**

(please print or type)

<b>OWNER</b> _____	<b>ADDRESS OF PROPERTY</b> _____	<b>ZIP</b> _____	<b>ZONING DISTRICT</b> _____
(Applicant shall be responsible to provide full legal description and parcel code. Use tax statement when appropriate)			
<b>LEGAL DESCRIPTION</b> _____			(See Attachment) <input type="checkbox"/>
<b>MAILING ADDRESS</b> _____		<b>ZIP</b> _____	<b>PHONE</b> _____
<b>NAME AND ADDRESS OF CONTRACTOR</b> _____		<b>LICENSE NUMBER</b> _____	<b>ZIP</b> _____ <b>PHONE</b> _____
<b>NAME AND ADD. OF ARCHITECT OR DESIGNER</b> _____		<b>ZIP</b> _____	<b>PHONE</b> _____

**PROJECT DESCRIPTION** (Generally describe the proposed construction and include building dimensions for new construction or additions)

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**CLASSIFICATION OF USE**

<input type="checkbox"/> Residential # Dwelling Units _____	<input type="checkbox"/> Manufactured Home	<input type="checkbox"/> Commercial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Agricultural
<input type="checkbox"/> Garage	<input type="checkbox"/> Warehouse Storage	<input type="checkbox"/> Other (specify) _____	<b>TYPE OF IMPROVEMENT</b>	
			New <input type="checkbox"/>	

<p style="text-align: right; font-size: small;">(omit cents)</p> <p><b>BASE COST</b> ..... \$ _____</p> <p>To be installed but not included in the above cost</p> <p>a. Electrical ..... _____</p> <p>b. Plumbing ..... _____</p> <p>c. Heating, air conditioning ..... _____</p> <p>d. Other (elevator, etc.) ..... _____</p> <p><b>PROJECT VALUATION</b> (Total Cost: Materials &amp; Labor) \$ _____</p> <p><b>SBC PROJECT VALUATION</b> (Bldg. Official's) ..... \$ _____</p>	<p style="text-align: center;"><b>APPLICABLE FEES - OFFICE USE ONLY</b></p> <p>Mechanical Permit \$ _____</p> <p>Plan Check Fee (Plan Review) _____</p> <p>State Surcharge _____</p> <p>Zoning Permit _____</p> <p>Demolition Permit _____</p> <p>Sign Permit _____</p> <p>Moving Permit _____</p> <p><b>TOTAL</b> \$ _____</p> <div style="text-align: right; margin-top: 20px;">                 Date _____                  Initials _____  <input type="checkbox"/> Paid             </div>
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**NOTICE FOR THE APPLICANT:**

APPLICANT MUST PROVIDE COMPLETE CONSTRUCTION PLANS FOR ALL BUILDING PERMIT APPLICATIONS. APPLICANT MUST PROVIDE SITE PLAN TO SCALE - WITH DIMENSIONS, SETBACKS OF ALL EXISTING AND PROPOSED STRUCTURES ON LOT. SEPARATE PERMITS ARE REQUIRED FOR ELECTRICAL, PLUMBING, AND THE USE OF PUBLIC PROPERTY SUCH AS STREETS, SIDEWALKS, ALLEYS, ETC. INCOMPLETE APPLICATIONS MAY BE REJECTED.

APPROVED BUILDING/ZONING PERMITS BECOME NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

**SIGNATURE OF APPLICANT** \_\_\_\_\_ **DATE** \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_ # \_\_\_\_\_ PARCEL CODE: \_\_\_\_\_

Use pen only - press hard for carbon copies

\* This form may also be used for zoning permit, demolition permit, moving permit and/or sign permit applications under the authorization of the Building Official or Zoning Administrator.