CITY OF MOORHEAD BUILDING CODES 403 CENTER AVENUE / PO BOX 779 / MOORHEAD, MINNESOTA 56561 PHONE: 218.299.5424 E-MAIL: buildingcodes@moorheadmn.gov			
MECHANICAL PERMIT APPLICATION			
CLASSIFICATION OF WORK: D Residential D Multiple D Commercial D Industrial			
SITE	Project Title		
	Project Site Address		
OWNER	Owner Contact Person		
	Owner Address	Phone Number	
	City, State, Zip	Fax Number	
CONTRACTOR	Contractor	Contact Person	
	Contractor Address	Phone Number	
		Email	
	City, State, Zip	Fax Number	License Number (If Applicable)
Valuation of Work \$			
Brief Description of Work:			
Deliv	very of Permit (check one): Mail Fax Pickup	o Ema	il
Fax Number for Permit Delivery:			
ιαλ			
Email Address for Permit Delivery:			
I hereby apply for a Mechanical Permit and acknowledge that the information above is complete and accurate; that this is not a permit; that the work will be performed in accordance with the conditions of the permit, the approved plans and specifications, and the Minnesota State Building Code; and, that I will cause the work to remain accessible and exposed for inspection purposes.			
Applic	ant Signature	Date	