



## 2012 Mechanical, Gas Piping, and Accessory Licensing Application

Minnetonka's license period is from February 1, 2012 to January 31, 2013. To be licensed for 2012, submit all of the necessary forms listed below to the following address:

City of Minnetonka  
Attn: Mechanical License  
14600 Minnetonka Blvd  
Minnetonka MN 55345

If you have any questions, please contact Kathy Leervig at (952) 939-8274 or [kleervig@eminnetonka.com](mailto:kleervig@eminnetonka.com).

1.  **2012 Contractor License Application (February 1, 2012 – January 31, 2013)**  
The application is partially completed – verify the information and make any necessary changes to the form. This form must be signed by a company owner/officer.
2.  **Certificate of Liability Insurance from your insurance agent**  
Include a copy of the insurance certificate. If you do not have a copy, ask your agent to send a copy to you - and include it with this application. The following limits are required: Bodily Injury \$500,000 each claim and each occurrence; Property Damage \$100,000. The "Certificate Holder" box must read "City of Minnetonka – Licensing", 14600 Minnetonka Blvd, Minnetonka, MN 55345
3.  **MN Dept of Labor & Industry – \$25,000 Surety Bond with the State Mechanical Code**  
Include a copy of the card that the State Dept of Labor & Industry issue to you.
4.  **Certificate of Competency – a Competency Card from the list of approved cities**  
Include a copy of the competency card(s): You must have a competency card for each type of license that you are applying for. *Note: A "Journeyman" classification cannot be accepted.*
5.  **Minnesota Business Tax Identification Form**  
Verify and/or complete all required areas – Be sure to sign the form.
6.  **MN Workers' Compensation Form**  
Verify and/or complete all required areas – Be sure to sign the form.
7.  **Total Fee - \$65 for one license, or \$130 if for both mechanical and a gas piping licenses.**  
Make check payable to the City of Minnetonka or the following credit cards are accepted: Visa, MasterCard, and Discover



COMMUNITY DEVELOPMENT— LICENSING  
14600 MINNETONKA BLVD  
MINNETONKA, MN 55345  
(952) 939-8274  
Fax (952) 939-8244

# 2012 CONTRACTOR LICENSE APPLICATION

License term: February 1, 2012 – January 31, 2013

1. Contractor Business/Trade Name & Address:

\_\_\_\_\_  
\_\_\_\_\_

Telephone Number with Area Code:

\_\_\_\_\_

Name of Person to Contact with Licensing Questions:

\_\_\_\_\_

Email address:

\_\_\_\_\_

Fax number:

\_\_\_\_\_

2. Put a checkmark by the license(s) requested and attach a copy of competency card:

**GAS PIPING (\$65.00 Fee)**

One fee of \$65.00 covers any one or all of the following three license categories, but can only be licensed if your competency card has been approved for this type of license.

**WARM AIR (Includes A/C)**       **REFRIGERATION**       **STEAM/HOT WATER**

**ACCESSORY (HVAC-B) (\$55.00)** — For installation, alteration, or repair of manufactured fireplaces, fireplace stoves, stoves, or other manufactured wood burning devices—You must hold a City of Minnetonka Gas Piping license to install the gas piping system. This license is not required if you submit a copy of the current years Minnesota Builder Contractor License Certificate or are licensed for Mechanical or Gas Piping.

Total Fee Enclosed \$\_\_\_\_\_ Make checks payable to the City of Minnetonka or the following credit cards are accepted: Visa, Mastercard, and Discover

3. The name of the person(s) holding the competency card(s) / master license(s) - By entering those name(s) on the line below, I confirm that this named Master License holder(s) is employed by or has an interest in the company listed above.

\_\_\_\_\_

I, (We), the undersigned, have complied with all requirements of section 510 of the Minnetonka City Code necessary for obtaining this license. I, (We), hereby apply for the license, subject to all conditions and provisions of the Minnetonka City Code.

***This application form must be signed by a company owner or officer.***

\_\_\_\_\_  
**OWNER/OFFICER SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**PRINT NAME AND TITLE**



## **2012 Mechanical, Gas Piping, & Accessory Licenses** **Certificate of Competency**

A Certificate of Competency card is accepted from the following cities: Minneapolis, St. Paul, Bloomington (license), Burnsville (letter), St. Louis Park, St. Cloud (Class B for heating installers), or Rochester. We cannot accept a “Journeyman” competency card or a card with a past expiration date.

### **Mechanical License – fee \$65.00**

One fee covers any one-or-all of the following three license categories:

- **Warm Air License – this license automatically covers air conditioning.**  
May install, alter, repair, clean or extend any heating, ventilation or exhaust system, manufactured fireplaces, fireplace stoves, stoves or other manufactured wood burning devices, incinerators, chimneys or vents. Holder of this class is the only person allowed to install furnaces.
- **Refrigeration License**  
May alter, install, repair, clean or extend any cooling or refrigeration system.
- **Steam/Hot Water License**  
Holder of this license may install, alter, repair, clean or extend any hot water low pressure steam system.

### **Gas Piping License – fee \$65.00**

May install, alter, repair, extend any gas piping system from the house side of the meter to appliances. Allowed to install manufactured gas and wood fireplaces.

### **Accessory Items – fee \$55**

May install, alter, or repair manufactured fireplaces, fireplace stoves, stoves, or other manufactured wood burning devices. **You must hold a City of Minnetonka Gas Piping license to install the gas piping system.**

This license is not required if you submit a copy of the current years Minnesota Builder Contractor License Certificate or if you are licensed for Mechanical or Gas Piping.

## MINNESOTA BUSINESS TAX IDENTIFICATION LAW

Pursuant to Minnesota Statute 270C.72 (Tax Clearance; Issuance of Licenses), Subd.4, the licensing authority is required to provide, upon request of the Minnesota Commissioner of Revenue, either the applicant's Minnesota business tax identification number with the business name and address – or the social security number of the primary office along with their complete name, home address, and home phone number,

Under the Minnesota Government Data Practices Act and the Federal Privacy Act of 1974, we are required to advise you of the following regarding the use of this information:

1. This information may be used to deny the issuance or renewal of your license in the event you owe Minnesota sales, employer's withholding, or motor vehicle excise taxes.
2. Upon receiving this information, the licensing authority will supply it only to the Minnesota Department of Revenue. However, under the Federal Exchange of Information Agreement, the Department of Revenue may supply this information to the Internal Revenue Service.
3. Failure to supply this information may jeopardize or delay the processing of your license issuance or renewal application.

**NOTE CHANGE IN REQUIREMENT:** In late 2009, the Department of Revenue changed their ruling and stated that the city no longer needs to collect social security information if the applicant provides both state and federal identification numbers.

<b>BUSINESS NAME UNDER WHICH THE MN TAX ID IS FILED</b>			<b>Type of license(s)</b>	
<b>Business address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>	<b>Phone number</b>
Minnesota Tax Identification Number	Federal Tax Identification Number		Minnetonka License Number	

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### INSTRUCTIONS FOR BOXES BELOW:

1. If all boxes above are completed, including both the Minnesota and Federal Tax numbers, no additional information is required by the MN Department of Revenue.
2. But, if no Minnesota and Federal Tax identification numbers are entered above, the following personal information about the owner or primary officer is required. Complete all boxes below, including the primary officer or owner's social security number, home address, and home phone. If office and home address are the same, please check the box to confirm.

<b>Applicant's (person's) name (LAST, first, middle initial)</b>		<b>Social Security Number</b>	
<b>Home address</b>	<b>Home City, State, Zip code</b>		<b>Home Phone number</b>
<input type="checkbox"/> <b>Check if address is both home &amp; business</b>			

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Certificate of Compliance Minnesota Workers' Compensation Law

Minnesota Statutes, Section 176.182 requires every state and local licensing agency to withhold the issuance or renewal of a license or permit to operate a business or engage in any activity in Minnesota until the applicant presents acceptable evidence of compliance with the workers' compensation insurance coverage requirement of Minnesota Statutes, Chapter 176. The required workers' compensation insurance information is the name of the insurance company, the policy number, and the dates of coverage, or the permit to self-insure. If the required information is not provided or is falsely stated, it shall result in a \$2,000 penalty assessed against the applicant by the commissioner of the Department of Labor and Industry.

**A valid workers' compensation policy must be kept in effect at all times by employers as required by law.**

BUSINESS NAME (Individual name only if no company name used)	LICENSE OR PERMIT NO (if applicable)
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DBA (doing business as name) (if applicable)

BUSINESS ADDRESS (PO Box must include street address)	CITY	STATE	ZIP CODE
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**YOUR LICENSE OR CERTIFICATE WILL NOT BE ISSUED WITHOUT THE FOLLOWING INFORMATION. You must complete number 1, 2 or 3 below.**

**NUMBER 1 COMPLETE THIS PORTION IF YOU ARE INSURED:**

WORKERS COMPENSATION INSURANCE COMPANY NAME (not the insurance agent)

WORKERS' COMPENSATION INSURANCE POLICY NO.	EFFECTIVE DATE	EXPIRATION DATE
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**NUMBER 2 COMPLETE THIS PORTION IF SELF-INSURED:**

I have attached a copy of the permit to self-insure.

**NUMBER 3 COMPLETE THIS PORTION IF EXEMPT:**

I am not required to have workers' compensation insurance coverage because:

- I have no employees.
- I have employees but they are not covered by the workers' compensation law. (See Minn. Stat. § 176.041 for a list of excluded employees.) Explain why your employees are not covered: \_\_\_\_\_.
- Other: \_\_\_\_\_

**ALL APPLICANTS COMPLETE THIS PORTION:**

I certify that the information provided on this form is accurate and complete. If I am signing on behalf of a business, I certify that I am authorized to sign on behalf of the business.

APPLICANT SIGNATURE (mandatory)	TITLE	DATE
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**NOTE: If your Workers' Compensation policy is cancelled within the license or permit period, you must notify the agency who issued the license or permit by resubmitting this form.**

This material can be made available in different forms, such as large print, Braille or on a tape. To request, call 1-800-342-5354 (DIAL-DLI) Voice or TDD (651) 297-4198.