



# ELECTRICAL APPLICATION FOR PERMIT

Office Use Only
_____ Permit Number
_____ Received By
_____ Date Received

DATE \_\_\_\_\_ YOUR E-MAIL ADDRESS \_\_\_\_\_

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

TENANT \_\_\_\_\_ SUITE NO. \_\_\_\_\_

THE APPLICANT IS: (CIRCLE ONE)    OWNER    CONTRACTOR    ARCHITECT/ENGINEER

<b>PROPERTY OWNER/ TENANT</b>	NAME _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ DAYTIME PHONE # WHERE YOU CAN BE REACHED IF WE HAVE QUESTIONS _____
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<b>CONTRACTOR</b>	NAME _____ LICENSE # _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____ DAYTIME PHONE # WHERE YOU CAN BE REACHED IF WE HAVE QUESTIONS _____
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<b>PERMIT TYPE</b>	<input type="checkbox"/> SINGLE FAMILY <input type="checkbox"/> MULTI-FAMILY <input type="checkbox"/> INSTITUTIONAL <input type="checkbox"/> TWO FAMILY <input type="checkbox"/> COMMERCIAL/INDUSTRIAL <input type="checkbox"/> SWIMMING POOL <input type="checkbox"/> TOWNHOUSE <input type="checkbox"/> CONDO* <input type="checkbox"/> UNDEFINED <small>*Caution: Fire Rated Construction</small>
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<b>TYPE OF WORK</b>	<input type="checkbox"/> NEW <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION/REMODEL <input type="checkbox"/> MAINTENANCE/REPAIR <input type="checkbox"/> TENANT FINISH <input type="checkbox"/> DEMOLITION
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**DETAILED DESCRIPTION OF WORK** \_\_\_\_\_

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\_\_\_\_\_

**PLEASE CHECK ALL THAT APPLY :**

<input type="checkbox"/> ADDITION <input type="checkbox"/> AIR CONDITIONING <input type="checkbox"/> BASEMENT <input type="checkbox"/> BATHROOM <input type="checkbox"/> BOILER <input type="checkbox"/> DEVICES <input type="checkbox"/> ELECTRICAL HEAT <input type="checkbox"/> FURNACE <input type="checkbox"/> FIREPLACE	<input type="checkbox"/> GARAGE <input type="checkbox"/> HYDRO MASSAGE/HOT TUB <input type="checkbox"/> IN-FLOOR HEAT <input type="checkbox"/> KITCHEN <input type="checkbox"/> MACHINERY <input type="checkbox"/> MAST <input type="checkbox"/> LIGHTING <input type="checkbox"/> NEW HOME WIRING	<input type="checkbox"/> OFFICE FURNITURE <input type="checkbox"/> PORCH WIRING <input type="checkbox"/> SAVER SWITCH <input type="checkbox"/> SERVICE OH <input type="checkbox"/> SERVICE UG <input type="checkbox"/> SERVICE TEMP* <small>*SEPARATE PERMIT</small> <input type="checkbox"/> SUB PANEL <input type="checkbox"/> SWIMMING POOL <input type="checkbox"/> TENANT FINISH <input type="checkbox"/> OTHER
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SIGN\*  
\*APPROVAL FROM PLANNING DEPARTMENT REQUIRED

SIGN APPROVAL  
FOR PLANNING DEPT. USE

\_\_\_\_\_  
INITIALS

\_\_\_\_\_  
DATE

CITY OF MINNETONKA COMMUNITY DEVELOPMENT DEPARTMENT  
 14600 MINNETONKA BOULEVARD  
 MINNETONKA MN 55345  
 OFFICE: (952) 939-8394    FAX: (952) 939-8244



ALL FEES ARE BASED ON VALUATION, INCLUDING THE COST OF LABOR AND MATERIALS:

TOTAL JOB VALUATION: \$ \_\_\_\_\_

TOTAL VALUE	COST OF PERMIT (SUBJECT TO MINIMUM FEE)
\$ 1 to \$ 300	MINIMUM FEE: RESIDENTIAL \$15.75 COMMERCIAL \$40.50
\$ 301 to \$ 500	\$ 15.75 plus 5.77% of amount over \$ 300
\$ 501 to \$ 1,000	\$ 27.25 plus 2.94% of amount over \$ 500
\$ 1,001 to \$ 5,000	\$ 42.00 plus 2.89% of amount over \$ 1,000
\$ 5,001 to \$10,000	\$ 157.50 plus 2.62% of amount over \$ 5,000
\$10,001 to \$25,000	\$ 288.75 plus 2.29% of amount over \$ 10,000
\$25,001 to \$50,000	\$ 632.10 plus 2.08% of amount over \$ 25,000
\$50,001 AND UP	\$ 1,151.85 plus 1.74% of amount over \$ 50,000

SWIMMING POOL: FLAT RATE \$52.00

Permit Fee \$ \_\_\_\_\_ **MINIMUM:** \$15.75 Residential - \$40.50 Commercial

Commercial Only \$ \_\_\_\_\_ 10% of Permit Fee: **ONLY** if Valuation is over \$30,000

Surcharge \$ \_\_\_\_\_ .0005 times the Total Job Valuation –**MINIMUM:** \$0.50

Total Due \$ \_\_\_\_\_ Make checks payable to: City of Minnetonka

**THIS IS AN APPLICATION FOR A PERMIT – NOT VALID UNTIL PROCESSED**

I hereby apply for a electrical permit and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes of the City of Minnetonka and with the Minnesota Building Codes; that I understand this is 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 review and approval of plans.

NAME OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_  
Please type or print

SIGNATURE OF APPLICANT \_\_\_\_\_

**SEPARATE PERMITS ARE REQUIRED FOR ANY BUILDING, MECHANICAL, AND PLUMBING WORK**

**HOMEOWNERS: ASK FOR OUR ELECTRICAL HANDOUT**