



**CITY OF WILLMAR
MECHANICAL PERMIT APPLICATION**

DATE: _____

PROPERTY OWNER NAME: _____

Job Site Address: _____

Phone #: _____

MECHANICAL CONTRACTOR: _____

Contractor License #: _____ Phone #: _____

MECHANICAL EQUIPMENT TO BE INSTALLED OR REPLACED:

| | | | |
|-----------------|-------|----------------|-------|
| Gas Furnace | _____ | Gas Fireplace | _____ |
| Air Conditioner | _____ | Wood Fireplace | _____ |
| Water Heater | _____ | Boiler | _____ |
| Wood Furnace | _____ | Other | _____ |
| *Gas Line | _____ | | |

Valuation And/ Or Material List \$: _____ Proposed Starting Date: _____

Special Comments: _____

Signature

Date

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 give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

*** All gas lines require pressure testing.**

NOTE: You are responsible for calling and scheduling all required inspections, including final inspections.

REFUND POLICY

Upon receiving a written request for a mechanical permit refund, the City of Willmar will process the refund as follows; the State Surcharge fees are not applicable for refund. The mechanical permit fee will be refunded to a maximum of 75%. All refunds will be returned by a check.

**City of Willmar | 333 Southwest 6th Street, Willmar, MN 56201
320-235-8311 | Fax: 320-235-4917**