City of Glyndon

Mechanical and Plumbing Permit Application

36 3rd Street SE
PO Box 223
Glyndon, MN 56547
218-498-2578

Permit Type: ☐ *Commercial* *or* ☐ *Residential*

MINIMUM SUBMITTAL REQUIREMENTS FOR COMMERCIAL PROJECTS: signed application, detail drawings, site plan, fixture units and sizes as required. **Exterior building elevations and screening details - applicant must show or describe how the rooftop and/or above ground mechanical units will be screened from streets, sidewalks, trails and neighboring properties.

Site/Project Address (if available):		Parcel #:		
Owner:	Phone:	Email:		
Owner Address:		City:	State:	Owner Zip:
Surveyor/Engineer/Contractor:		Phone:	Contractor License Number:	
Address:	Email:	City:	State:	Zip:
Contact Person:	Phone:	Fax:		
Contact Address:	Email:	City:	State:	Contact Zip:

Description of Project:

Plumbing (please indicate the number of new or relocated fixtures)

____Bathtub
____Clothes Washer
____Dishwasher
____Drinking Fountain
____Drains
____Water Heater
____Gray Water System
____Grease Interceptor/ grease trap
____Hose Bibs
____Rain System
____Sinks
____Water piping & treatment
____Other_____
____Pool or Spa (circle one)
____Reclaim Water System
____Shower
____Shower/Tub Combo
____Toilet
____Urinal

_____Water Service (size of pipe_____inches
_____Backflow Preventer: (size_____inches)_____DCVA_____RPBA
Describe:_____

Total Number of Fixtures_____

Mechanical (please indicate the number of new or relocated appliances)

____Air Handling Unit
____Air conditioner
____Appliances
Boiler/Compressor/ Roof Unit
____> 50hp / >1.75M Btu/h
____> 30hp / >1 - 1.75M Btu/h
____> 15hp / >500 - 1M Btu/h
____> 3hp / >100 - 500 Btu/h
____<3hp / <100,000 Btu/h
____Fans
____Furnace
____Fireplace
____Floor Furnace
____Gas Piping (# of outlets)
____Heat pump
____Comm. Kitchen Exhaust Hood (type:_____)
____Water Heater
____Other _____
____Refrigeration Equipment
____Unit Heater
____Appliance Vents - Single Duct
____Medical Gas Piping

Total Number of Fixtures_____

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.

****BY LEAVING THE CONTRACTOR INFORMATION SECTION BLANK, I HEREBY CERTIFY FURTHER THAT CONTRACTORS (GENERAL OR SUBCONTRACTORS) WILL NOT BE HIRED TO PERFORM ANY WORK IN ASSOCIATION WITH THIS PERMIT. (Building permits only)**

_____ SIGNATURE OF OWNER / AUTHORIZED AGENT

_____ PRINTED NAME

_____ DATE