



GAS MECHANICAL/HVAC APPLICATION

Planning and Zoning Administration | 13880 Business Center Drive Elk River, MN 55330

Office: 763-765-4450 | zoning@co.sherburne.mn.us

Contractor Name: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Contractor License # _____

Property Owner Name: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Parcel ID Number: _____ Lot Area (acres): _____

Address where work will be performed: _____

Describe project: _____

Furnace

A/C

Mini-split

HRV/ERV

Boiler

Garage Heater

REQUIRED INSPECTIONS

Air test if new gas line installed

Final after installation of appliance

(Call 763-765-4450 to request inspection)

AGREEMENT: I hereby certify that the information herein is correct and agree to do the proposed work in accordance with the submitted documents, provisions of the Sherburne County Ordinance, and the Minnesota State Building Code. I further agree that any plans and specifications submitted herewith shall become a part of this permit application. I also understand that by applying for this permit, I grant the zoning authority access to the above property for inspections throughout the application and permitting process.

Signature of Owner or Contractor: _____

Printed Name of Owner or Contractor: _____

Date: _____