



Edina Fire Department
 6250 Tracy Avenue
 Edina, Minnesota 55436-2580
 (952) 826-0330
 Fax (952) 826-0393

City of Edina



FIRE – CONSTRUCTION PERMIT APPLICATION

Permit # _____

Permits as authorized by 2007 Minnesota State Fire Code Section 105.7

NOTE: Please print or type, sign and return this permit application along with a check made payable to "City of Edina" to the Edina Fire Department.

SITE ADDRESS _____ **SUITE/UNIT#** _____

TENANT/BUILDING NAME _____

SITE CONTACT NAME _____ **PHONE** _____

NAME OF BUSINESS / CONTRACTOR _____

BUSINESS ADDRESS _____ **PHONE** _____

CITY _____ **STATE** _____ **ZIPCODE** _____ **FAX** _____

PROJECT MANAGER _____ **PHONE** _____ **CELL** _____

A permit is required for the installation, modification, repair, construction, alteration, removal, abandonment, or disposal of any of the following:

<input type="checkbox"/> Battery Systems, > 50 gal.	<input type="checkbox"/> Flammable / Combustible Liquids	<input type="checkbox"/> LP Gas System
<input type="checkbox"/> Compressed Gases, Flammable Per 2007 MSFC Table 105.6.8 List quantities and provide MSDS's for each	Tanks: Size _____ Quantity _____	<input type="checkbox"/> Industrial Ovens
<input type="checkbox"/> Hazardous Materials Per MSFC Table 105.6.20 List quantities and provide MSDS's for each	<input type="checkbox"/> Temporary Heat - LP <input type="checkbox"/> Install <input type="checkbox"/> Remove <input type="checkbox"/> Above Ground <input type="checkbox"/> Underground <input type="checkbox"/> Fuel Dispensing Station	<input type="checkbox"/> Spray Booth/Room or Dipping Tank Tents/Canopies: <input type="checkbox"/> Tent > 200 sq ft <input type="checkbox"/> Canopy > 400 sq ft <input type="checkbox"/> Canopy open/all sides >700 sq ft

DESCRIPTION OF WORK TO BE DONE _____

ANTICIPATED START AND END DATE _____

PERMIT FEE IS BASED ON VALUATION For Permit Fee call Fire Prevention Secretary at (952) 826-0339

VALUATION \$ _____
 (Based on job costs; rental fees, materials and labor charges)

PERMIT FEE = \$ _____

PLAN REVIEW FEE = \$ _____

TOTAL PERMIT COST = \$ _____

*** Non Business Hours Inspections are \$80.00 per hour with a minimum 1 hour fee.**
Normal Business Hours are Monday – Friday 7:00 am to 4:00 pm.

- All information given above is complete and accurate.
- All work shall comply with the Edina City Code and the Minnesota State Fire Code.
- I understand that this is an application only, not a permit. Work shall not start without an approved permit. Work started without approval shall be subject to an investigation fee equal to the permit fee.
- All work shall be done according to plans approved by the City of Edina when approved plans are required. Please provide two sets of completed plans and equipment specification sheets with this application.

Applicant Signature _____ **Date** _____

Reviewed by Inspector _____ Date _____
Revision 7/07, 1/08, 1/09, 1/10

Received by _____ Date _____