City of Coon Rapids

Electrical Permit Application

Job Site Address:_____ Unit # _____ Zip _____Permit #_____

Project Valuation: $_____ The Applicant is: ____Owner ____Contractor

Property Owner

Name:_____Contact Person:_____

Address:_____

City:_____ State:_____ Zip:_____ Phone:_____

Contractor

Name:_____Contact Person:_____

Address:_____
Number and Street Name City State Zip

Phone:_____ Cell:_____Fax:_____

E-mail:_____Contractor License#: _____

Property Use

- ☐ Residential
- ☐ Commercial
- ☐ Industrial
- ☐ Institutional
- ☐ Public

Type of Structure

- ☐ Principal Building
- ☐ Garage
- ☐ Accessory Building
- ☐ Temporary Building
- ☐ Swimming Pool

Type of Work

- ☐ **New Building**
- ☐ Addition
- ☐ Remodel
- ☐ Repair/Replace
- ☐ Disconnect

- ☐**Existing Building**
- ☐ Sign-other
- ☐ Sign-Permanent
- ☐ Sign-Temporary
- ☐ Low Voltage

Electrical Item(s) *indicate quantity for each*

___ Air Conditioner
___ Annunciator
___ Appliance
___ Boiler/Hot Water
___ Branch Circuit
___ Central Station Control
___ Control Panel
___ Disconnect
___ Feeder
___ Furnace
___ G.F.I. Receptacle
___ Heat Detector
___ Indicating Device
___ Initiating Device
___ Office Furniture Feed Only
___ Office Furniture Partition Wiring
___ Opening- Light
___ Opening- Other
___ Opening- Receptacle
___ Opening- Switch
___ Pool/ Spa / Hot tub
___ Potable Hot Water
___ Refrigeration Equip
___ Service
___ Other (see remarks)
___ Sign
___ Smoke Detector
___ Subpanel
___ Telecommunications
___ Temporary Service
___ Ventilation Equip
___ Water Flow Detector
___ Whirlpool Tub

Permit becomes void if work does not begin within 180 days or is suspended at any time for over 180 days. Permits issued and Inspections made by the City are a public service and do not constitute any representation, guarantee, or warranty, either implied or expressed, to any person as to the condition of the building or conformance to applicable construction codes. The Undersigned acknowledges that this application has been read and that the above is correct and agrees to comply with all the ordinances and laws of the City of Coon Rapids.

Periodic and/or a final inspection of this work are required by the Minnesota State Building Code. It is the responsibility of the applicant to call the Coon Rapids Inspections Division at 763 767-6476 to schedule an inspection.

Applicant's Signature _____ Date _____

Electrical Permit Fees

Electrical Permit Fee: $_____

State Surcharge: $_____

Plan Review Fee: $_____

TOTAL FEE DUE: $_____

The permit fee shall be **$ 40.00** plus **1.75 percent** of the value of the work to be done

***State surcharge is calculated at .0005 times the cost of the job.**

***NOTE**: When applicable, a plan review charge equal to **35 percent** of the permit fee will be added,
(Please check with The Building Inspection Department)

RESIDENTIAL ONLY -SINGLE ITEM

Replace or repair one electrical item including the equipment served shall be $40.00.

Single Electrical Item Permit Fee: $ 40.00

State Surcharge: $ 5.00

TOTAL FEE DUE: $ 45.00

Required Inspections

Add	Delete	
☐	☐	Consultation
☐	☐	Electrical Service
☐	☐	Final
☐	☐	NFPA Form
☐	☐	No Insp. Req'd
☐	☐	Rough-In
☐	☐	Rough-In Ceiling
☐	☐	Rough-In Slab
☐	☐	Rough-In Wall
☐	☐	Temp. Service
☐	☐	Trench

NOTES

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_____

COON RAPIDS
Minnesota

City of Coon Rapids Building Inspections Division
11155 Robinson Dr. Coon Rapids MN, 55433
(763)767-6476 • Fax (763)767-6573