



**FIRE PERMIT APPLICATION**

CITY OF LAKEVILLE  
 BUILDING INSPECTIONS DEPARTMENT  
 20195 HOLYOKE AVENUE  
 LAKEVILLE, MN 55044  
 952-985-4440  
[www.ci.lakeville.mn.us](http://www.ci.lakeville.mn.us)

Office Use Only
Permit Number _____
Received By _____
Date Received _____
Amount _____

DATE \_\_\_\_\_ YOUR E-MAIL ADDRESS \_\_\_\_\_

SITE ADDRESS \_\_\_\_\_

TENANT \_\_\_\_\_ SUITE NO. \_\_\_\_\_

<b>CONTRACTOR</b>	COMPANY NAME _____ LICENSE # _____		
	ADDRESS _____		
	CITY _____	STATE _____ ZIP _____	
	CONTACT NAME _____ OFFICE PHONE # _____		
	DAYTIME PHONE # WHERE YOU CAN BE REACHED _____		
<b>TYPE OF WORK</b>	<input type="checkbox"/> NEW	<input type="checkbox"/> ADDITION	<input type="checkbox"/> ALTER / REMODEL
	<input type="checkbox"/> REPAIR	<input type="checkbox"/> REPLACE	<input type="checkbox"/> DEMOLITION
<b>PERMIT SUB-TYPE</b>	<input type="checkbox"/> Automatic Fire-Extinguishing Sys	<input type="checkbox"/> Industrial Ovens	
	<input type="checkbox"/> Standpipe Systems	<input type="checkbox"/> LP Gas	
	<input type="checkbox"/> Flammable & Combustible Liquids Systems	<input type="checkbox"/> Paint Booth	
	<input type="checkbox"/> Hazardous Material		
<b>FIRE ITEMS</b>	<u>QTY</u> <u>FIRE ITEMS</u>	<u>QTY</u> <u>FIRE ITEMS</u>	
	_____ Dry System _____ Wet System _____ Preaction System _____ Deluge System _____ Compressed Gases _____ Fire Pumps & Related Equipment	_____ New Sprinkler Heads _____ Relocated Sprinkler Heads _____ Spare Sprinkler Heads & Wrench _____ Underground Fuel Tank _____ Above Ground Fuel Tank _____ Fire Alarm Low Voltage	

**JOB DESCRIPTION:** \_\_\_\_\_

**FIRE PERMIT FEES:**

**Residential Fees:** New Construction \$90.00 + \$1.00 (State Surcharge) = \$91.00  
 Remodel \$45.00 + \$1.00 (State Surcharge) = \$46.00

**Commercial Fees:**

Job Cost: \$ \_\_\_\_\_

1-1/2% of contract cost up to \$10,000 and \_\_\_\_\_  
 1% of cost above \$10,000 plus surcharge. + \_\_\_\_\_  
 (Surcharge = Contract Cost x .0005) + \_\_\_\_\_  
**Total** = \_\_\_\_\_

**Example: \$12,000 Job Cost**

\$10,000.00 x 1.5% = \$150.00  
 \$ 2,000.00 x 1% = 20.00  
 \$12,000 x .0005 = 6.00  
**TOTAL** \$176.00

Minimum of \$45.00 + \$1.00 (State Surcharge) = \_\_\_\_\_

**Applicant's Printed Name** \_\_\_\_\_

**Applicant's Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**OFFICE USE**

**SYSTEM TYPE:**

- \_\_\_ NEW
- \_\_\_ ADDITION
- \_\_\_ REPAIR
- \_\_\_ DEMOLISH
- \_\_\_ REPLACE
- \_\_\_ ALTER/REMODEL

**INSPECTIONS:**

- \_\_\_ AIR TEST
- \_\_\_ FINAL
- \_\_\_ FIRE PUMP TEST
- \_\_\_ FLOW TEST
- \_\_\_ FLUSHING
- \_\_\_ HYDRO-STATIC TEST
- \_\_\_ MAIN DRAIN TEST
- \_\_\_ OTHER
- \_\_\_ ROUGH-IN
- \_\_\_ TANK / PIPING REMOVAL
- \_\_\_ TRIP TEST

**PERMIT FEE:**

- PERMIT FEE: \$ \_\_\_\_\_
- SURCHARGE: \$ \_\_\_\_\_
- OTHER: \$ \_\_\_\_\_
- TOTAL: \$ \_\_\_\_\_

ISSUED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

COMMENTS: \_\_\_\_\_