

**CITY OF WINONA - Protective Inspection Department**  
207 Lafayette Street, Winona, MN 55987  
(507)457-8231; FAX (507)457-8212

**MECHANICAL-HEATING PERMIT APPLICATION** \_\_\_\_\_

(Please print or type)

PERMIT NO. \_\_\_\_\_

Receipt # \_\_\_\_\_

Property Address: \_\_\_\_\_

Suite/Unit No. \_\_\_\_\_

Applicant is: Owner  Contractor  Other

Property Owner: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Address: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Address: \_\_\_\_\_

State License No.: \_\_\_\_\_

City Contractor No.: \_\_\_\_\_

Description of Work:  New  Add-on  Replace  Alter

SYSTEM TYPE:  Hot Water  Steam  Warm Air  Kitchen Hood  Gas Water Heater  Makeup Air

MAKE: \_\_\_\_\_

MODEL: \_\_\_\_\_

BURNER TYPE:  Gas  Oil  Wood  Liquid Petroleum

FLUE: \_\_\_\_\_ Size \_\_\_\_\_ New \_\_\_\_\_ Existing \_\_\_\_\_ Type (Class "B", Masonry, PVC)

SIZE: BTU Input \_\_\_\_\_

GAS PIPING: \_\_\_\_\_ feet installed. \_\_\_\_\_ Copper \_\_\_\_\_ Black Iron \_\_\_\_\_ Flexible \_\_\_\_\_ No. Outlets

REMARKS: - (Specify any removal or nature of alteration) \_\_\_\_\_

\*Gas piping pressure tests are required. Combustion air required.

PERMITS FEES: Permit \_\_\_\_\_ State Surcharge 1.00 = \_\_\_\_\_ Total

Credit Card  Cash  Check

*The undersigned hereby makes application for a permit to do heating installation work as herein specified, agreeing to do all work in strict accordance with the Minnesota Mechanical Code and City of Winona ordinances.*

\_\_\_\_\_  
Signature of Contractor or Owner Date

\_\_\_\_\_  
Winona Authorized Signature Date