



# City of Chaska

## Application for Fire Protection Equipment Permit

Today's Date: \_\_\_\_\_

Permit Number: \_\_\_\_\_

1. Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Addition: \_\_\_\_\_ P.I.D.: \_\_\_\_\_

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

2. Owner: \_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address) (City) (State) (Zip) (Phone)

3. Contractor: \_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Address) (City) (State) (Zip) (Phone)

4. Class of Work:  New  Addition  Alteration  Repair

5. Describe Work: \_\_\_\_\_

6. Declared Value: \_\_\_\_\_ 7. Starting Date: \_\_\_\_\_

8. Materials Filed with Application:

Plan Review Information Sheet:  (for sprinkler system only) Three sets of Plans:  Three sets of Hydraulic Calculations:

9. Special Conditions:

I hereby certify that I have read and examined this application and know the same to be true and correct. I further certify that I am the owner or authorized agent of the owner of the above property and that all construction will conform to existing State laws, local ordinances, and approved plans. Further, I hereby agree that the Chaska Zoning Administrator or his/her designated representative may enter upon my property to investigate this request.

SIGNATURE: \_\_\_\_\_ DATED: \_\_\_\_\_

of:  Contractor  Authorized Agent  Owner or  Builder

CONTRACTOR'S LICENSE NUMBER: \_\_\_\_\_

### For City of Chaska Use Only

**PERMIT FEE SCHEDULE:**

Permit Fee 1.5% of valuation \$ \_\_\_\_\_

Plan Checking, 65% of permit fee \$ \_\_\_\_\_

Additional \$5.00 Technology fee \$ \_\_\_\_\_

**TOTAL PERMIT FEE.....** \$ \_\_\_\_\_

**Plans Checked By:**

\_\_\_\_\_  
(Initials)

\_\_\_\_\_  
(Date)

**Approved for Issuance By:**

\_\_\_\_\_  
(Initials)

\_\_\_\_\_  
(Date)

**Paid by:**  Check **Accepted by:** \_\_\_\_\_  
 Cash **Date:** \_\_\_\_\_