## **CITY OF MORA**



101 Lake Street South Mora, MN 55051-1588

Caleb Christenson, Building Official Phone 320-225-4808 | Fax 320-679-3862 c.christenson@cityofmora.com

## **Mechanical Permit Application**

Building Site Address		
Property Owner Name		
Contractor Name		
		se Number
Type of Work:		
☐ New Construction ☐ Addit☐ Other	·	□ Repair
Valuation of Project: \$		
Describe Work and Equipment to be Installed:		
I hereby certify that the above information is correct and true. The work will be in conformance with the City of Mora Codes, State of Minnesota Codes, and the rulings of the City of Mora Building Department.		
Signature	Da	ate
Permit Approved By	Da	ite
		Fees = \$ \$
		\$ Surcharge = \$ <b>TOTAL DUE = \$</b>
Permit Number	_	