



City of Belle Plaine
 218 Meridian Street North
 PO Box 129
 Belle Plaine, MN 56011

ELECTRICAL Inspections: **EMAIL PERMIT**
 Justin Doebbeling
 612-643-1838 | Mon. - Thurs. | 7:00 - 8:30 a.m.
 Schedule online: jdinspectionsmn.com

CONTRACTOR ELECTRICAL PERMIT APPLICATION		Permit #:
SITE ADDRESS:		P.I.N.:
OWNER NAME: <small>(and Address if different than Site Address)</small>		Phone: Email:

CONTRACTOR NAME: ADDRESS:	Phone: Email:
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Contractor License:	VALUATION <small>(Labor & Materials)</small> : \$
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WORK DESCRIPTION:

INDICATE ALL THAT APPLY (fees according to the MN State Fee Schedule)

<i>Over 600 volts fees are doubled*</i>	Qty	Amount per	Total		Qty	Amount per	Total
Service/Power Supply 0-400 Amps		\$35.00	\$	New Home Feeders/Circuits (up to 30)		\$100.00	\$
Service/Power Supply 401-800 Amps		\$60.00	\$	New Home Feeders/Circuits (over 30)		\$6.00	\$
Service/Power Supply over 800 Amps		\$100.00	\$	New/Extend Feeders/Circuits (Det. Gar.)		\$6.00	\$
Feeders/Circuits 0-200 Amps		\$6.00	\$	Multi-Dwelling Units		\$70.00	\$
Feeders/Circuits over 200 Amps		\$15.00	\$	Reconnected Feeders/Circuits		\$2.00	\$
Electric Sign/Outline Lighting		\$5.00	\$	Street/Parking/Lighting Standards		\$5.00	\$
Luminaire Retrofit		\$0.25	\$	Tech. System Device		\$0.75	\$
Transformers up to 10kVA		\$15.00	\$	Mfg Home Park Supply		\$35.00	\$
Transformers over 10kVA		\$30.00	\$	Number of Inspection Trips		\$35.00	\$
Solar		\$	\$	Other		\$	\$
TOTAL 1						TOTAL 2	\$

<i>* The fee calculated above OR \$35.00 multiplied by the number of inspection trips, whichever is greater.</i>	*TOTAL 1 + TOTAL 2	\$
	STATE SURCHARGE	\$1.00
	TOTAL PERMIT FEE	\$

Signature of this application by the legal property owner or a licensed contractor, as the owner's representative is required and authorizes the City of Belle Plaine Zoning Administrator or designee and the City of Belle Plaine Building Official or designee to enter upon the property to perform needed inspections. If entry is refused, the Building Official shall have recourse to the remedies by law to secure entry. Permit may be suspended or expired when building and work is not commenced within **180 days** from the date of Permit issued, or if building and work suspended, abandoned or not inspected for **180 days**. I agree to pay all plan review fees, even if I choose not to proceed with the work. Refunds shall be per the City of Belle Plaine Fee Schedule. A request in writing shall be submitted within 180 days of fee payment by the original applicant. I hereby acknowledge that I have read this application and state that all information is true and correct to the best of my knowledge. I further agree that all work performed will be in accordance with approved plans, specifications and conditions, and to abide by all of the ordinances of the City and the Laws of the State of Minnesota regarding actions taken pursuant to this permit.

SIGNATURE OF CONTRACTOR: _____ **DATE:** _____

OFFICE USE ONLY

<p><i>I hereby certify that I inspected the electrical installation herein on the dates stated:</i></p> <p>ROUGH-IN Inspection(s): _____ Date: _____</p> <p>FINAL Inspection: _____ Date: _____</p>	<p>Date Received: _____</p> <p>Form of Payment: _____</p> <p>Transaction Number: _____</p> <p>Date Issued: _____</p> <p>Issued By: _____</p> <p>Comments: _____</p>
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