



**Minneapolis Health Department  
 Environmental Programs Division  
 250 South 4th Street, Room 510  
 Minneapolis, MN 55415-1316  
 (612) 673-3000 Fax (612) 673-2635  
[EnvironmentalHealthPermit@minneapolismn.gov](mailto:EnvironmentalHealthPermit@minneapolismn.gov)  
**PAY ONLY BY MAIL, FAX OR PHONE CONTACT****

## ABRASIVE BLASTING APPLICATION

**Minneapolis City Ordinance 59.50. Abrasive Blasting Permit Required**

- No person shall abrasively blast the interior or exterior of any building, structure, or other architectural surface except under specific permit from the assistant city coordinator for regulatory services or their designee.
- All painted surfaces to be abrasively blasted must be tested for lead content following EPA, HUD or ASTM protocols.
- In the event the applicant cannot perform the abrasive blasting on the scheduled date(s) in the application; the applicant shall provide notification to the City, the property owner, tenants, and others as required in 59.50(c) twenty-four (24) hours prior to the commencement of the rescheduled abrasive blasting operation.

**A COPY OF THE GENERAL NOTICE OF ACTIVITY MUST BE SUBMITTED WITH PERMIT APPLICATION**

**ANALYSIS REPORT AS REQUIRED IN 59.50(D) MUST BE SUBMITTED WITH THE APPLICATION.**

Parties applying for an abrasive blasting permit must provide a general notice of forty-eight (48) hours in advance their construction activity to all occupants of the building, structure or architectural surface where the construction activity will occur and to all building owners and their tenants within a 75 foot radius of the building, structure or architectural surface to be abrasively blasted. The notice must include contact information for the party performing the construction activity, brief description of the proposed work, intended dates and times and identify that complaints regarding the construction activity will be received by Minneapolis Information and Services by dialing 311 in Minneapolis or 612-673-3000 from cell phones and outside Minneapolis.

APPLICATION DATE:		PERMIT ISSUE DATE:	
PROPERTY OWNER:			PROPERTY OWNER TELEPHONE:
ADDRESS OF BLASTING:			
CONTRACTOR COMPANY NAME:			TELEPHONE:
CONTRACTORS ADDRESS:			
CONTRACTOR PRINTED NAME			CONTRACTOR'S SIGNATURE:
START DATE OF ABRASIVE BLASTING:		ESTIMATED TIME OF ENTIRE ABRASIVE BLASTING OPERATION:	
TYPE OF BLASTING MATERIAL:		TYPE OF BLASTING METHOD:	

**FOR PAINTED SURFACES TO BE ABRASIVELY BLASTED THE FOLLOWING SECTION MUST BE COMPLETED**

STRUCTURE/SURFACE TO BE BLASTED: (HOUSE, GARAGE, BDRM 1, BDRM 2, ...)	LOCATION OF BLASTING?		LEAD TEST RESULT?	
	<input type="checkbox"/> INSIDE	<input type="checkbox"/> OUTSIDE	<input type="checkbox"/> POSITIVE	<input type="checkbox"/> NEGATIVE
	<input type="checkbox"/> INSIDE	<input type="checkbox"/> OUTSIDE	<input type="checkbox"/> POSITIVE	<input type="checkbox"/> NEGATIVE
	<input type="checkbox"/> INSIDE	<input type="checkbox"/> OUTSIDE	<input type="checkbox"/> POSITIVE	<input type="checkbox"/> NEGATIVE
	<input type="checkbox"/> INSIDE	<input type="checkbox"/> OUTSIDE	<input type="checkbox"/> POSITIVE	<input type="checkbox"/> NEGATIVE
	<input type="checkbox"/> INSIDE	<input type="checkbox"/> OUTSIDE	<input type="checkbox"/> POSITIVE	<input type="checkbox"/> NEGATIVE
	<input type="checkbox"/> INSIDE	<input type="checkbox"/> OUTSIDE	<input type="checkbox"/> POSITIVE	<input type="checkbox"/> NEGATIVE

**OTHER CONDITIONS AND RESTRICTIONS:** DO NOT ALLOW DUST, ABRASIVE BLASTING MATERIAL, PAINT OR OTHER DEBRIS TO CROSS THE PROPERTY LINE. CLEAN-UP MATERIALS DAILY. CONTRACTOR ASSUMES RESPONSIBILITY OF ALL CLEAN UP FROM ABRASIVE BLASTING MATERIALS AND DEBRIS BOTH ON AND OFF THE PROPERTY.

**Send my permit:**  Pickup  Mail to contractor  Fax - - or  Email:

**See the Directors Fee Schedule for permit fees. Payment details must be received with application.**

*Make checks to "Minneapolis Finance Department". Credit cards accepted by fax to 612-673-2635 or phone.*

**Credit Card Fax Send:** card type, name of card holder, CC#, expiration date and security code

**Credit Card Phone Provide:** Contact and phone number:

**Mail Application to: Lead Hazard Control, 250 South 4<sup>th</sup> Street, Room 414, Minneapolis, MN 55415**

Failure to obtain and have a valid permit on site is a violation of this code.

Please allow up to five (5) business days from receipt of permit fee for permit issuance.