

**Application Form
WRECK01**



**Development Services
Customer Service Center**
250 South 4th Street – Room 300
Minneapolis, MN 55415 – 1316
Office 612-673-3000 or 311
Fax 612-370-1416
TTY 612-673-2157
www.minneapolismn.gov/mdr

Office Use Only

A/P # _____

Amount \$ _____

Flag(s) _____

Development Coordinator _____ Date _____

WRECKING PERMIT APPLICATION

JOB ADDRESS (INCLUDE ADDRESS #, STREET NAME, & DIRECTIONAL), Apt/Unit#

APPLICANT (applicant is: <input type="checkbox"/> Contractor <input type="checkbox"/> Property Owner)		PHONE	
ADDRESS	CITY	STATE	ZIP
LICENSE #	EMAIL		
CONTACT NAME		PHONE	

CERTIFICATION STATEMENT

I hereby certify that: I am authorized to make this application; all information provided on this application or in other submittals is true and accurate to the best of my knowledge; authorization from the owner to perform the proposed work has been granted; all work performed as part of any permit will comply with all applicable state and municipal laws and ordinances, and any required contractor license, personal license, or certificate of competency will be obtained prior to any work being performed. I understand that the issuance of a permit does not grant any contractor license, certificate of competency, business license, or other license, and unlicensed persons shall not be hired to perform work that requires a license or certificate of competency.

SIGNATURE _____ DATE _____

TYPE OF WORK

Chapter 249 (Director's Orders) CPED Owned Property Emergency Demo Private Demo

TYPE OF BUILDING

Accessory of Utility Structure Commercial Multi Family Dwelling
 Single Family Dwelling Two Family Dwelling Townhome

SQUARE FOOTAGE OF DISTURBED AREA

VALUATION OF WORK

\$ _____

MAKE CHECKS PAYABLE TO: **MINNEAPOLIS FINANCE DEPARTMENT**, OR CHARGE TO

ALL MAJOR CREDIT CARDS ACCEPTED	ACCOUNT#	CVV#	EXP DATE: Mo ___ Yr ___
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JOB ADDRESS (INCLUDE ADDRESS #, STREET NAME, & DIRECTIONAL), Apt/Unit#

WRECKING DETAILS

Number of Stories___ Width___ Depth___ Height___

Number of Living Units _____

Type of Living Units: ___Dwelling ___Hotel/Motel ___Rooming House ___Shared Bath

SAC Type of Use: ___Apt ___Commercial ___Industrial ___Multi-family dwelling ___Public Assistance ___SFD

Total SAC Credits _____

APPROVALS (requires authorized signatures)

RPZ (PUBLIC SERVICE CENTER):	Sewer Department (PUBLIC SERVICE CENTER):
Electric:	Water Department (PUBLIC SERVICE CENTER):
Telephone:	Pest Abatement (PUBLIC SERVICE CENTER):
Gas:	Hennepin County (REAL ESTATE TAXES):
Cable Systems:	CPED Preservation and Design (PUBLIC SERVICE CENTER):
Elevator (PUBLIC SERVICE CENTER):	Public Works, Traffic (MOVING PERMIT ONLY!)
Hydrant Permit (PUBLIC SERVICE CENTER):	Certificate of Compliance (PUBLIC SERVICE CENTER):

Minneapolis Wrecking and Moving Permit	
Fee Schedule**	
VALUE OF WORK	FEE
Minimum Fee - Residential or Commercial	\$80.90 (State Surcharge does not apply)
\$1.00 - \$500.00	\$35.30 (Minimum Fee Applies)
\$501.00 - \$2,000.00	\$35.30 - first \$500. Plus \$4.30 each add'l \$100.00 And fraction thereof including \$2,000.
\$2,001.00 - \$25,000.00	\$99.80 - first \$2,000.00 Plus \$19.80 each add'l \$1,000.00 And fraction thereof including \$25,000.
\$25,001.00 - \$50,000.00	\$555.20 - first \$25,000 Plus \$14.30 each add'l \$1,000.00 And fraction thereof including \$50,000.
\$50,001.00 - \$100,000.00	\$912.70 - first \$50,000. Plus \$10.20 each add'l \$1,000.00 And fraction thereof including \$100,000.
\$100,001.00 - \$500,000.00	\$1,422.70 - first \$100,000. Plus \$8.00 each add'l \$1,000.00 And fraction thereof including \$500,000.
\$500,001.00 - \$1,000,000.00	\$4,622.70 - first \$500,000. Plus \$6.70 each add'l \$1,000.00 And fraction thereof including \$1,000,000.
\$1,000,001.00 and up	\$7,972.70 - first \$1,000,000. Plus \$5.40 each add'l \$1,000.00 And fraction thereof