

City of Farmington
430 Third Street
Farmington, MN 55024
651-280-6830
651-280-6840



Furnace and Air conditioning

This pamphlet is a compilation of some of the standard requirements based on the State Mechanical Code for projects of this type. This information packet does not contain all of the specific codes and should only be used as a guide. The permittee is responsible to meet all code requirements applicable to each project.

Mechanical Permits are required for installation and replacement of furnace and air conditioning equipment in the City of Farmington

*** Electrical Permit is required for furnace and air conditioner installation and replacement**

General code requirements for furnaces:

- Furnace shall not be located in or obtain combustion air from; sleeping rooms, bathrooms, or storage closets
- Furnace shall be accessible for inspection, repair, and replacement without removing permanent construction or other appliances. A 30"x30" space shall be provided in front of the control side of the appliance.
- Condensate drain lines shall not be smaller than the drain connection on the appliance and shall discharge to an approved plumbing fixture or disposal area.
- Vent systems shall be sized, installed, and terminated according to vent and appliance manufacturer's installation instructions.
- Plastic vent pipe and fittings shall be installed according to appliance manufacturer's installation instructions. Where primer is required it shall be of contrasting color.

- Clearance from type B vents to combustibles shall be according to manufacturer (typically 1")
- Clearance from single wall vent to combustibles shall be according to manufacturer (typically 6")
- Gas lines shall have a dedicated shutoff valve within 6' of furnace
- A sediment trap shall be installed before all automatically controlled gas appliances.
- A union shall be installed between the dedicated shutoff valve and the furnace.

General code requirements for AC

- Equipment installed at grade level shall be supported on a level concrete slab or other approved material not less than 3" above adjoining grade or shall be suspended not less than 6" above adjoining grade
- Refrigerant access ports shall be fitted with locking type or tamper resistant caps
- Piping insulation exposed to weather shall be protected from damage, including sunlight, which causes degradation of the material. (U.V. protection)

When work is ready, an inspection must be requested and made. Inspection hours are 9:00 AM to 3:15 PM Weekdays. All inspections require at least 24 hour notice to the Building Department 651-280-6830.

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Application for Mechanical Permit HVAC

Date _____

Permit No. _____

Site Address	_____
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Applicant: Owner ____ Contractor ____

Property Owner	Name/Company _____ Phone No. _____ Address _____ City _____ State _____ Zip _____ Email address _____
Contractor	Company _____ Phone No. _____ Contractor License No.: _____ Expiration Date _____ Contact Person (Print) _____ Phone No. _____ Address _____ City _____ State _____ Zip _____ Email address: _____

FORM ONLY VALID THROUGH 12/31/22

Work Type:	<input type="checkbox"/> - New <input type="checkbox"/> - Remodel/Alt. <input type="checkbox"/> - Repair <input type="checkbox"/> - Replace (Provide job cost for non-residential projects.)
Mechanical Permit/ System Type: (Maximum of 4 different types)	<input type="checkbox"/> - Heating (Quantity ___) <input type="checkbox"/> - Air (Quantity ___) <input type="checkbox"/> - Power Plant <input type="checkbox"/> - Ventilation <input type="checkbox"/> - Gas Piping <input type="checkbox"/> - Garage Heater <input type="checkbox"/> - Duct Work <input type="checkbox"/> - Refrigeration <input type="checkbox"/> - Exhaust
Fuel	<input type="checkbox"/> - Natural Gas <input type="checkbox"/> - Wood <input type="checkbox"/> - Electric <input type="checkbox"/> - Fuel Oil <input type="checkbox"/> - Propane <input type="checkbox"/> - Solar
Office Use Required Inspections/Tests	<input type="checkbox"/> - Rough In (Ductwork) <input type="checkbox"/> - Gas Line Test (24Hr.) <input type="checkbox"/> - Final <input type="checkbox"/> - ORSAT <input type="checkbox"/> - Other _____

(Over)

System Description

	1	2	3	4
System Type	_____	_____	_____	_____
Quantity	_____	_____	_____	_____
Make	_____	_____	_____	_____
Model	_____	_____	_____	_____
Fuel	_____	_____	_____	_____
Flue Size	_____	_____	_____	_____
Output	_____	_____	_____	_____
CFM Total	_____	_____	_____	_____
CFM Outside	_____	_____	_____	_____
Tons	_____	_____	_____	_____
Horsepower	_____	_____	_____	_____

Estimated Value of Work \$ _____ **(Non-residential only)**

Residential:	New Construction	\$86.00 (\$86.00 +1.00 s/c)	Commercial:	1.25% of contract cost + surcharge
	Repair/Replace	\$56.00 (\$55.00 +1.00 s/c)		(Contract valuation x .0005)
				Minimum of \$101.00 (\$100.00 +1.00 s/c)

This permit shall be null and void if authorized work is not started within 180 days or if work is suspended or abandoned for 180 days or more after work is started.

The undersigned hereby represents upon all of the penalties of the law, for the purpose of including the City of Farmington to take the action herein requested, that all statements are true, and that all work herein will be done in accordance with the ordinances of the City of Farmington and the State of Minnesota.

_____/_____
Applicant's Signature/Date