## Application Form FCOM



## **Inspections Services Regulatory Services**

505 South 4<sup>th</sup> Avenue, Room 510A Minneapolis, MN 55415 Office 612-673-3000 or 311 TTY 612-673-2157

www.minneapolismn.gov/fire-permits

Office Use Only	
LIC #	
Amount \$	
Flag(s)	
CSR Initials	_ Date

## **APPLICATION FOR A COMMERCIAL BUILDING REGISTRATION**

New Application $\Box$ Update to Existing Application $\Box$				
SITE INFORMATION				
PROPERTY ADDRESS				
BUILDING TYPE				
☐ Commercial Only	☐ Mixed-use (commercial & reside	ntial)		
BUILDING GROSS SQUARE FOOTAGE				
☐ Level 1 (0 − 5,000 Square Feet) - <b>\$50</b>	☐ Level 5 (250,001 − 1,000,000 Square Feet) - <b>\$620</b>			
☐ Level 2 (5,001 – 10,000 Square Feet) - <b>\$94</b>	☐ Level 6 (1,000,001 – 2,000,000 Square Feet) - <b>\$827</b>			
☐ Level 3 (10,001 – 100,000 Square Feet) - <b>\$277</b>	☐ Level 7 (2,000,001 Square Feet and over) - <b>\$910</b>			
☐ Level 4 (100,001 – 250,000 Square Feet) - <b>\$403</b>				
OWNED INFORM	ATION (REQUIRED)			
NAME	ATION (REQUIRED)			
BUSINESS NAME or D/B/A NAME				
MAILING ADDRESS	CITY	STATE	ZIP	
MALING ADDIESS	CITI	SIAIL	2	
CELL DUONE	FRAAU			
CELL PHONE	EMAIL			
BUILDING CONTACT IN	FORMATION (REQUIRED)			
mailing address must be different from site add	•	at property		
NAME				
MAILING ADDRESS	CITY	STATE	ZIP	
CELL PHONE	EMAIL			
	1			
I certify that the above information is true and correct, and I understand that I am required to notify the Department of Regulatory Services of any				
changes and submit those changes in writing.				
SIGNATURE DATE				

PAYMENT OPTIONS			
☐ In person at the City of Minneapolis Service Center, Monday through Thursday, 8 a.m. to 4 p.m., and Friday, 9 a.m. to 4 p.m.:			
5	Public Service Building 505 South 4 <sup>th</sup> Avenue, Skyway Level Minneapolis, MN 55415		
$\square$ By mail, with a ch	eck payable to Minneapolis Finance Department, or the below credit or debit card information, mailed to:		
Ir	nspections Services		
5	505 South 4 <sup>th</sup> Avenue, Room 510A		
N	Ainneapolis, MN 55415		
	MasterCard or Visa only		
Card Number	<del></del>		
Expiration Date _	CVV		