



375 Jackson Street, Suite 220
Saint Paul, MN 55101-1806
Tel: 651-266-8989 | Fax: 651-266-9124

ELEVATING DEVICE PERMIT APPLICATION

Number		Street Name		St. Ave. Blvd. Etc.		Direction	Suite/Apt.	Building Name		Date
PROJECT ADDRESS										
Contractor (Include Contact Person)				Address City State, Zip+4					Phone	
Contractor's Email:										
Property Owner (Include Contact Person)				Address City State, Zip+4					Phone	
New <input type="checkbox"/> Repair /Alter <input type="checkbox"/> Modernization <input type="checkbox"/> <input type="checkbox"/> Residential – No. of Units: _____ <input type="checkbox"/> Commercial				Start Date Estimated		ESTIMATED VALUE OF WORK				
				Estimated Completion Date						

Unit Data Circle to Indicate	Passenger	Freight	Escalator / Moving Walk	Accessibility Lift**	Limited Use Limited Access	Material Lift	Dumbwaiter	Other:		
Manufacturer Number	Manufacturer Make	Capacity (Pounds)	Speed FPM	Car Weight (pounds)	Description of Car Enclosure	Number of Entrances				
Door Type	Center Opening	Side Slide	Two Speed Side Slide	Two Speed Center Opening	Bi-Parting	Power Operated Bi-Parting	Swing	Other		
Equipment Data Circle to Indicate	Elevator/ Lift Type	Traction	Hydraulic	Roped Hydraulic	Gearless	Drum	Other:			
Machine Sheave Size (Inches)	Motor HP	Operating Pressure PSI	Normal	Full	Relief	Governor Type	Flyball	Centrifugal		
Hoistway Data Circle to Indicate	Number of Floors	Number of Openings	Travel	Feet	Inches	Hoist Ropes	Quantity	Size (inches)	Governor Rope	Size
	Piston Diameter (inches)	Type of Buffer	Oil	Spring	Solid	Gas Spring Return	City Number of Unit: <div></div>			
Guide Rails Type/Weight	Car	Counterweight	(Enter # for Repair / Modernization Permit -Leave Blank for New)							

Brief Description of Job, Location in Building, Floor, and Other Comments:

Inspector's Approval:

Permit Number: (Office Use Only)

SUMMARY OF FEES

Applicant certifies that all information is correct and that all pertinent state regulations and city ordinances will be complied within performing the work for which this permit is issued:

Applicant's Signature (Master Elevator Constructor License Holder)

Permit Fee
(see back of form)

\$

State Surcharge
(Minimum 50 ¢)

\$

Total Permit Fee

\$

*A 2.49% service fee will be charged for all credit or debit card transactions and will appear as a separate transaction on your card statement.**

Signature of Cardholder (required for all charges):☐ AMEX ☐ Discover ☐ MasterCard ☐ VisaSecurity
Code ►

Month /Year

BILLING ZIP CODE:

Enter
Account
Number ►

[illegible]

**If you are paying for your permit by *American Express, Discover, MasterCard or Visa*,
you may fax your application.**

The credit card information section must be filled in and signed.

Our FAX number is 651-266-9124. If paying by check, please mail this application and payment.

*Effective April 3, 2021, a 2.49% service fee will be charged for all credit or debit card transactions and will appear as a separate transaction on your card statement. This fee is charged by the service provider the Department of Safety and Inspections uses to handle credit card transactions. The City will not receive any of the service fees. If paying online, applicants will also have the option to pay by e-check. There is no service fee for this payment type.

Effective: 02/25/2023

INSTRUCTIONS FOR FEE CALCULATION

New construction, repairs and modernization of existing devices:

- One and one-half percent (.015 times) of the total valuation of the work with a minimum fee of \$151.00.

The State surcharge is based on the valuation of the job:

- \$1.00 to \$1000.00 is a 50¢ surcharge.
- \$1001.00 and up is .0005 times the value of the job.

**** Limited Use / Limited Access or Accessibility Lift ****

Prior approval is required for installation.

Contact the Elevator Inspector between 7:30- 9:00 a.m. at 651-266-9010.

**ALL WORK MUST COMPLY WITH THE LATEST ADDITION OF A18.1, A17.1, A17.3 AND THE
MINNESOTA STATE CODE SECTIONS 1307 AND 1341.**

**If you have any questions, please call the field inspector, 651-266-9010.
Field Inspector's office hours are 7:30 to 9:00 a.m., Monday through Friday.**

Permit fee information: 651-266-8989

Visit our website at www.stpaul.gov/dsi