

<input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Supplement	Application Number: LCCL _____
Are you submitting a permit application at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No	

APPLICANT	Business Name _____ Phone (____) ____ - _____
	DBA Name _____
	Address _____ City _____ State ____ Zip _____
	Applicant's Name _____ Title _____
	Applicant's Signature _____ Applicant's Phone (____) ____ - _____
	E-mail Address _____
Identification	Minnesota Business Tax ID Number _____
	The State of Minnesota requires that your MN Tax ID(not federal tax ID) be kept on file at the City of Bloomington. The MN Tax ID must be provided on your Contractor License Application prior to issuance of your contractor license. You may register to obtain your free MN Tax ID in less an 10 minutes through the following link https://www.mndor.state.mn.us/tp/webreg from the MN Department of Revenue.

Description	Fee
<input type="checkbox"/> HVAC (warm air, ventilation, air conditioning)	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
<input type="checkbox"/> Hot water/steam	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
<input type="checkbox"/> Oil burner	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
<input type="checkbox"/> Refrigeration (commercial)	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
<input type="checkbox"/> Gas installer A or B	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
<input type="checkbox"/> Flammable tank	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
TOTAL AMOUNT DUE Now:	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>

Note: All license fees are \$75 per trade.

(Office Use Only)

Date Application received _____	Payment entered _____
Bond _____ Test _____ Inspection _____	Date Mailed _____

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Proof of Workers' Compensation Insurance Coverage:

Insurance company name _____ Dates of coverage _____

Policy number/Self-insurance permit number (Per *Minnesota Statute Section 176.182*) _____

Or,

I am not required to have workers' compensation liability coverage because:

- I have no employees. (See Minn. Stat. § 176.011, subd. 9 for the definition of an employee.)
- I am self-insured for workers' compensation (include a copy of authorization to self-insure from the Minnesota Department of Commerce).
- I have employees but they are not covered by the workers' compensation law. (See Minn. Stat. § 176.041 for a list of excluded employees.) Explain why your employees are not covered:

- Other: _____

Please complete this two page form and return to the City of Bloomington Licensing via email, mail or in person.

Required documents to include with Contractor License Application:

1. **Mechanical Contractor Bond** on file at the Minnesota Department of Labor and Industry (DOLI).
2. **Minneapolis or St. Paul Certificate of Competency or proof of passing the City of Bloomington's HVAC or Gas Installer-Class 'A' quarterly test.** Please verify the expiration date on each master *Certificate of Competency*. The type of work covered by each master competency is listed below:
 - **Gas Installer-Class 'A'** - gas lines to furnaces, boilers, make-up air and rooftop units.
 - **HVAC** - warm air, ventilation, and air conditioning. Warm air competence covers ventilation and air conditioning.
 - **Hot Water/Steam** - commercial or residential boiler work.
 - **Oil Burner** - equipment with a fuel input of 1,000,000 BTU/hr or greater.
 - **Refrigeration** - commercial refrigeration only.
3. Payment by cash, credit/debit card or check.

City of Bloomington
Business Licensing
1800 West Old Shakopee Road
Bloomington, MN 55431
952-563-8728 BusinessLicensing@BloomingtonMN.gov