

APPLICATION FOR PLUMBING PERMIT

CITY of _____

Owner _____ Phone: _____

Site Address _____

Residential _____ Commercial _____

Type of Construction: New _____ Remodel _____

NOTE:

All inspections require 24-hour notice, call (320) 251-2852.
 Minimum fee includes one rough in & one final inspection.
 Permit expires six months from date of issue

Permit Number _____

Date Issued _____

Permit Fee \$ _____

Minimum \$30.00

State Surcharge \$ **.50**

Below Grade Insp. \$ _____

Additional \$30.00

Add'l Inspection \$ _____

\$30.00 Each

Total Fee \$ _____

Paid/Check # _____

Make separate check for each permit payable to the City of _____

Area Drains _____ Backflow Preventor (RPZ) _____ Bathtubs _____ Clear Water Pumps _____ Dishwashers _____ Drinking Fountains _____ Floor Drains _____ Garbage Disposals _____ Grease Traps _____ Inflammable Traps _____ Laundry Tubs _____ Lavatories _____	Lawn Sprinkler System _____ Refrigerator w/Water _____ Showers _____ Sinks _____ Sewage Ejector _____ Urinal _____ Washer Stand Pipe _____ Water Closet _____ Water Heater _____ Water Conditioner _____	Drain, Waste and Vent: _____ <div style="text-align: right;"> ABS _____ PVC _____ Other _____ </div> Sewer Hookup _____ Water Hookup _____ Roof Drains _____ Potable Water: _____ <div style="text-align: right;"> Copper _____ ***PEX _____ Other _____ </div> TOTAL FIXTURES _____
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The undersigned hereby makes application for a permit for the work herein specified, agreeing to do all such work in strict accordance with all applicable codes and ordinances and hereby declares that all the facts and representation stated in this application are true and correct and that the property owner has accepted these materials and equipment.

Plbg. Cont. _____ Tel. # _____

Signed _____ Lic. # _____

Approved by: _____ (Plbg. Insp.)



GREAT NORTHERN
BUILDING INSPECTION, INC.
 CERTIFIED INSPECTORS
 & ASSESSORS

512 Third Street North, Waite Park, MN 56387
 Office: 320-251-2852 • Fax: 320-251-7263