

PLUMBING PERMIT APPLICATION
CITY OF PROCTOR
100 Pionk Drive • Proctor • Minnesota 55810 • (218) 624-3641

(Applicant to complete numbered spaces only)

| | | | |
|-------------------------|------------------------------|-----------------------------------|---|
| Job Address | | | |
| 1 Parcel Code | Lot | Block | Subdivision |
| 2 Owner | Mail Address | Zip | Phone |
| 3 Contractor | Mail Address | Phone | License No |
| 4 Architect or designer | Mail Address | Phone | License No |
| 5 Use of building | | | |
| 6 Class of work | <input type="checkbox"/> New | <input type="checkbox"/> Addition | <input type="checkbox"/> Alteration <input type="checkbox"/> Repair |
| 7 Describe work: | | | |

IMPORTANT
48 hours notice (not including Sat/Sun) is required for an inspection. Failure to have an inspection could result in demolition of work completed. Inspections required:

- Air test and pipe inspection under slab
- Rough in
- Air test
- Menometer

| PERMIT FEES | | |
|-------------|-------------------------|-------|
| NO. | TYPE OF FIXTURE OR ITEM | FEE |
| | WATER CLOSET (TOILET) | |
| | BATHTUB | |
| | LAVATORY (WASH BASIN) | |
| | SHOWER | |
| | KITCHEN SINK & DISPOSAL | |
| | DISHWASHER | |
| | LAUNDRY TUB | |
| | CLOTHES WASHER | |
| | WATER HEATER | |
| | URINAL | |
| | DRINKING FOUNTAIN | |
| | FLOOR SINK OR DRAIN | |
| | SLOP SINK | |
| | WASTE INTERCEPTOR | |
| | VACUUM BREAKERS | |
| | SUMP PUMP | |
| | SUB TOTAL | |
| | (BASE) PERMIT | 15.00 |
| | TOTAL FEE | |

The owner of this building and the undersigned agree to comply with all applicable laws of PROCTOR, MN (which includes Building Codes) and to allow access to said property by Proctor Building/Plumbing Officials and Planning & Zoning Commissioners. It is the applicants/property owners responsibility to build on their own property and call for required inspections.

All commercial and non-owner occupied plumbing within the city of Proctor must be completed by a licensed plumber.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not.

Signature of contractor Date

Signature of owner - if builder Date

PERMIT VALIDATION

PERMIT NUMBER _____
 PERMIT ISSUED DATE _____ RECEIPT # _____
 APPROVED BY _____