

# PLUMBING PERMIT APPLICATION: RESIDENTIAL

590 40th Avenue NE, Columbia Heights, MN 55421 • PH: 763-706-3670 • www.columbiaheightsmn.gov

DATE RECEIVED: \_\_\_\_\_

<b>**Please Note**</b>	A Licensed Contractor <u>MUST</u> pull the Plumbing Permit if the Property is <u>NOT</u> Owner Occupied.		
<b>APPLICANT</b>	<input type="checkbox"/> Property Owner	<input type="checkbox"/> Contractor	Email: _____
<b>SITE ADDRESS</b>	_____		
<b>PROPERTY OWNER / TENANT</b>	Name: _____ Phone: _____ Address _____ City: _____ State: _____ Zip: _____		
<b>CONTRACTOR</b> Note: A State & City License is required	Name: _____ Phone: _____ Address: _____ City: _____ State: _____ Zip: _____ State License #: _____ Expiration Date: _____		
<b>PROPERTY TYPE</b>	<input type="checkbox"/> Single Family	<input type="checkbox"/> Double / Duplex	<input type="checkbox"/> Townhouse
<b>TYPE OF WORK</b> Please select all that apply	<input type="checkbox"/> Alteration / Remodel	<input type="checkbox"/> New Installation / Construction	<input type="checkbox"/> Replacement
	<input type="checkbox"/> Bathroom Sink / Lavatory <input type="checkbox"/> Bathtub <input type="checkbox"/> Clothes Washer <input type="checkbox"/> Dishwasher <input type="checkbox"/> Floor Drains <input type="checkbox"/> Gas Piping	<input type="checkbox"/> Irrigation <input type="checkbox"/> Kitchen Sink <input type="checkbox"/> Laundry Tray <input type="checkbox"/> Shower <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Toilet	<input type="checkbox"/> Water Heater <input type="checkbox"/> Water Meter Install <input type="checkbox"/> Water Piping <input type="checkbox"/> Water Softener <input type="checkbox"/> Backflow Preventer <input type="checkbox"/> Other
<b>DESCRIPTION OF WORK</b>	_____		
	Total Number of Fixtures: _____	Fees are Based on a Fee Schedule of \$10.00 per Fixture with a minimum fee of \$65.	

**THIS IS AN APPLICATION FOR A PERMIT – NOT VALID UNTIL PROCESSED**

I hereby apply for a building permit and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes of the City of Columbia Heights and with the Minnesota Construction Codes; that I understand this is not a permit but only an application for a permit and work is not to start without a permit; that the work will be in accordance with the approved plan in the case of all work which requires review and approval of plans.

PRINT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

<b>PERMIT FEE:</b>	\$ _____	Fee is \$10/fixture with a Minimum Fee of \$65.00
<b>PLAN REVIEW:</b>	\$ _____	
<b>SURCHARGE:</b>	\$ _____	\$1.00 State Surcharge
<b>CONTRACT LICENSE:</b>	\$ _____	
<b>TOTAL DUE:</b>	\$ _____	Make Checks Payable to the City of Columbia Heights