

PLUMBING PERMIT APPLICATION

Phone: 651-552-4116

Email: permits@wspmn.gov

Website: www.wspmn.gov

OFFICE USE ONLY	
Received Date:	Permit Number: PLMB

PROJECT ADDRESS:			
OWNER/OCCUPANT INFORMATION:			
Name:		Phone:	
Address:		Suite/Unit:	
City:		State:	Zip:
Email:			
CONTRACTOR INFORMATION:			
Name:		Phone:	
Address:		Suite/Unit:	
City:		State:	Zip:
Email:			
State License #:		Contact Name:	

APPLICANTS SIGNATURE:	
Applicant certifies that all information is correct and that all pertinent state regulations and city ordinances will be complied with in performing the work for which this permit is issued.	
Printed Name:	Date:
Signature:	Date:

PROJECT DESCRIPTION

RESIDENTIAL FEES					
Base Fee: \$100 (includes 1 fixture) – Add \$10 for each additional fixture					
New Single Family Dwelling	\$300			Manometer Final Test	\$10 #
Water Closet	\$10 #			Swimming Pool	\$10 #
Sink/Laundry Tub	\$10 #			Water Heater	\$10 #
Bath Tub/Shower	\$10 #			Kitchen Range	\$10 #
Clothes Washer	\$10 #			Clothes Dryer	\$10 #
Garbage Disposal	\$10 #			Hose Bib	\$10 #
Other/Misc. _____					\$10 #
License Verification Fee \$5.00			State Surcharge \$1.00		

COMMERCIAL FEES	
Project Value (materials & labor)	\$
Permit Fee (project value x .015 or \$100, whichever is greater)	\$
State Surcharge (project value x .0005)	\$
TOTAL:	\$