

Gas Piping Permit Application

Street Address				Jwner Name		Owner Phone	
Is a meter needed? Yes		7 Vas	Owner Name Select one: Owner Occupied 1 or 2-Family Other Residential Commerical Compressed Natural Gas		Type of improvement		ement
Description of improvement	ent						
Number of fixture openings			Minimum acceptable valuation (labor and materials)				
Type #		#					
Gas Furnace/Boiler			Number of Gas \$500 X Appliances		# openings =		\$
Gas Stove/Oven							
Gas Dryer Gas Water Heater			Underground Gas	\$75	# lineal feet =		\$
Gas Water Heater			Piping 973				
						/aluation * Total	\$
Rear property line Property line Street Water Heater Type (circle):			Side property line Standard	* must	Labor and Material Valuation* be equal to or greater than the calculated valuation Permit Fee ^ state Surcharge TOTAL DUE \$ Both Types		\$ \$
Metering Pressure (circle):			7" Water Column		2# Elevated Pressure		
In consideration of the issue and delivery to me by thecity of Duluth of a permit to install the gas piping work indicated above, I agree to do said proposed work in strict accordance with all City ordinances and applicable State regulations relative to same, and that when the work is ready, I shall notify the Division of Construction Services requesting that an inspection be made of said work, as required by City ordinance.							
Applicant Signature					Date		
Licensee, cardholder or owne		Pate	Company Name				
Master License #				Company Addres	SS		
Pipelayer's Card # (outside sewer & water only)					Phone		Fax
Office Use Only Permit Number Is				ssued By		PIN	