

**Plumbing Permit Application**

Street Address	Owner Name	Owner Phone
Is the property owner-occupied? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is the property a one-family dwelling? <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Type of improvement</b> <input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Repair, replacement or alteration
Does the project include a Food Service Facility? A food service facility is defined as: Any facility which prepares or serves food for commercial sale or distribution to any members of the public. <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, approval for compliance with Fats Oils and Grease Ordinance is required PRIOR TO ISSUANCE OF PLUMBING PERMIT. Contact Todd Carlson (218) 730-4051 or <a href="mailto:tcarlson@duluthmn.gov">tcarlson@duluthmn.gov</a> <b>AND plumbing plan review required.</b>

Description of improvement		Minimum acceptable valuation (labor and materials)			
Number of fixture openings	Type #	INSIDE	Valuation	# openings =	\$
	Water closets	Plumbing	\$1000 X		\$
	Bath tubs	Rough-in, repipe or finish	\$500 X	# openings =	\$
	Basins			# openings =	\$
	Sinks	Floor Drain	\$300 X	# openings =	\$
	Laundry trays	Roof Drain	\$500 X	# openings =	\$
	Shower baths	OUTSIDE			
	Washing machines	Sewer or liner	\$75 X	# of feet	\$
	Urinals	Sewer & water (1" & smaller)	\$100 X	# of feet	\$
	Other outlets			# of feet	\$
<b>Total # openings*</b>		Water (1" or less)	\$75 X	# of feet	\$
*If total is greater than 25 or includes food service facility, plumbing plan review required prior to issuance of plumbing permit. <b>Select one:</b>		Water (over 1")	\$150 X	# of feet	\$
		Storm Sewer	\$75 X	# of feet	\$

Two copies of plans are submitted with this application

Plans previously submitted

Indicate Design Firm Name and Plan or Revision Date (required)

  
  

Firm Plan or Rev Date

Plan review not required

**Calculated Valuation \* Total** \$

**Labor and Material Valuation\*** \$

\* must be equal to or greater than the calculated valuation

**Permit Fee ^** \$

^use permit fee schedule to calculate fee

**State Surcharge** \$

**TOTAL DUE** \$

In consideration of the issuance of a permit to install the plumbing 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 Construction Services Division requesting that an plumbing inspection be made of said work.

Applicant Signature	Date
Licensee, cardholder or owner signature	Date
Master License #	Company Name
Pipelayer's Card # (outside sewer & water only)	Company Address
	Phone Fax

Office Use Only	Permit Number	Issued By	PIN
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