



Date Rec'd

CITY OF PRIOR LAKE PLUMBING PERMIT

- 1. Blue File
- 2. Gold City
- 3. Yellow Applicant

| |
|-------------------|
| PERMIT NO. |
|-------------------|

(Please type or print and sign at bottom)

| |
|----------------|
| ADDRESS |
|----------------|

| |
|----------------------------|
| ZONING (office use) |
|----------------------------|

| | | | |
|--|-------|----------|-----|
| LEGAL DESCRIPTION (office use only) | | | |
| LOT | BLOCK | ADDITION | PID |

| | |
|-----------------|---------------|
| OWNER | |
| (Name) _____ | (Phone) _____ |
| (Address) _____ | |

| | | | |
|---------------------------|---------------|---------------|------------|
| APPLICANT | | | |
| (Name) _____ | (Phone) _____ | | |
| (Address) _____ | | | |
| | (Address) | (City) | (Zip Code) |
| (Contact Person) _____ | | (Phone) _____ | |
| APPLICANT SIGNATURE _____ | | DATE _____ | |

APPLICANT PLEASE COMPLETE BELOW

| Quantity | Type of Fixture | Quantity | Type of Fixture |
|----------|--|----------|------------------------------|
| | Bath Tub with or without shower | | Rough-ins |
| | Dishwasher | | Water Heater |
| | Floor Drain | | Water Softener |
| | Lavatory (Bathroom Sink) | | Stand Pipe (Washing Machine) |
| | Laundry Tray (1 or 2 compartment sink) | | Sewage Ejector |
| | Shower Stall | | Backflow Assembly |
| | Sinks | | Backflow Assembly Test |
| | Bar Sink | | Lawn Sprinkler |
| | Water Closet (Toilet) | | Other |

FEE SCHEDULE

| | |
|---|--|
| Industrial, Commercial & Multi-family 1% of job cost with a \$54.50 minimum | Residential, New One & Two-Family \$154.50 |
| | Residential, Additions & Alterations \$54.50 |

Estimated Cost \$ _____ Building Permit # _____

| | |
|----------------------------|----------------|
| PLUMBING PERMIT FEE | \$ _____ |
| STATE SURCHARGE | \$ <u>1.00</u> |
| TOTAL PERMIT FEE | \$ _____ |

(Office Use Only)

| | |
|--|-------------|
| This Application Becomes Your Building Permit When Approved | |
| _____ | _____ |
| Building Official | Date |

| | |
|------|-------------|
| Paid | Receipt No. |
| Date | By |