

## PLUMBING APPLICATION

**Submit Applications to:** [Permits@rumrivercc.com](mailto:Permits@rumrivercc.com) Scheduling: 763-331-7722

**THIS APPLICATION BECOMES A NUMBERED PERMIT AFTER THE REVIEW IS COMPLETE AND PAYMENT OF FEES.**

**WORK IS NOT TO BEGIN PRIOR TO ISSUANCE. ~ ALL INFORMATION IS REQUIRED AND MUST BE COMPLETED.**

SITE ADDRESS \_\_\_\_\_ PROPERTY ID # \_\_\_\_\_

PROPERTY OWNER NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_ EMAIL \_\_\_\_\_

APPLICANT IS:    **CONTRACTOR**    **OWNER**    ~    **PROPERTY TYPE:**    **COMMERCIAL**    **RESIDENTIAL**

CONTRACTOR COMPANY NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_ EMAIL \_\_\_\_\_

PLUMBING CONTRACTOR PC# \_\_\_\_\_ VERIFIED BY OFFICE STAFF \_\_\_\_\_

APPLICANT CONTACT NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

**ADDITION**    **ALTERATION/REMODEL**    **BASEMENT FINISH**    **NEW CONSTRUCTION**    **OTHER**

VALUATION (LABOR & MATERIALS) \$ \_\_\_\_\_

**FIXTURE REPLACEMENT**    **NEW INSTALLATION**

PROJECT DESCRIPTION \_\_\_\_\_

*The undersigned acknowledges the above information is correct and accepts responsibility for compliance with all applicable laws and ordinances of the ruling jurisdiction.*

APPLICANT SIGNATURE \_\_\_\_\_

PRINTED NAME \_\_\_\_\_ DATE \_\_\_\_\_

**\*OFFICE USE ONLY\***

DATE ALL REQUIRED INFORMATION WAS RECEIVED: \_\_\_\_\_

**APPROVAL:**

**BUILDING** \_\_\_\_\_ **DATE** \_\_\_\_\_ **PLUMBING PERMIT FEE \$** \_\_\_\_\_

**PAYMENT INFO:**

**PLAN REVIEW FEE \$** \_\_\_\_\_

**PAYMENT RECEIVED BY** \_\_\_\_\_ **SURCHARGE FEE \$** \_\_\_\_\_

**CASH** \_\_\_\_\_ **CK#** \_\_\_\_\_

**TOTAL FEE \$** \_\_\_\_\_

**RECEIPT #:** \_\_\_\_\_ **DATE** \_\_\_\_\_