

PLUMBING PERMIT APPLICATION

333 S. Washington Street · PO Box 526 · Redwood Falls, MN 56283 Office: 507-616-7400 · Fax: 507-637-2417 inspections@ci.redwood-falls.mn.us

PROPERTY INFORMATIO	N				
Property Address					
Property Owner					
Mailing Address					
Email Address			Phone Number		
APPLICANT/ CONTRACTO	DR INFORMATION				
Applicant Type:	Property Owner	Contractor; License	#		
EPA Certified Lead Renovatior	n Firm 🔲 Yes	🗖 No	Does No	t Apply (Explain):	
Applicant/ Company Name					
Address					
Contact Person			Phone		
Email Address			Cell Phone		
PROJECT TYPE	CONSTRUCTION TY	YPE	WOR	К ТҮРЕ	
Single-Family	New Construction		Backflow / RPZ	Elec Water Heater	
Residential	Alteration		Bar	Roof Drain	
□ Multi-Family Residential	Replacement		Bathroom	Floor Drain	
	Accessory Structure		Kitchen	Irrigation	
Commercial	Cther		Laundry	Other	
Description of Work					
Estimated Value of	Work (Include Labor)				
	APPLICATION - NO	OT VALID UNTIL PR	ROCESSED		
and that the work will be in Building Codes; and that I und	nd I acknowledge that the information of a conformance with the ordinance derstand this is not a permit but of cordance with the approved plan	es and codes of the Ci only an application for	ty of Redwood Falls a a permit and work is	and with the Minnesota State not to start without a permit; that	
Applicant Signature			Date		
	FOR O	FFICE USE ONLY			
Permit Fee					
Plan Review Fee	MN RU	MN RULES 1300.0160, sub.8 and Redwood Falls City Ordinance state that if work for which a permit is required by the code has been commenced without first obtaining a permit, a penalty of a double fee shall be assessed to the			
State Surcharge					
Other/ Penalties	permit.				
Total Fees					