

APPLICATION FOR PLUMBING PERMIT
 CITY OF AVON
 140 Stratford St. E, P.O. Box 69
 Avon, MN 56310
 Phone: (320) 356-7922 Fax: (320) 356-2259

FOR OFFICE USE ONLY		
Date: _____	Building Permit No: _____	Plumbing Permit No. _____
PID No: _____	Lot No: _____	Block No: _____
Addition: _____		

Address of Property: _____

Applicant: _____ Phone: _____

Owner of Property: _____ Phone: _____

Address: _____

Name of Plumber who will be responsible for plumbing installation: _____

Company Name: _____ License No. (if applicable) _____

Building Type: Commercial _____ Industrial _____ Residential _____
 Has a submittal to the State Plumbing Code Division been completed yes _____ no _____ (required by MHD 4715.3130)

Water Meter Size (i.e. ¾" or 1")\$ _____

No.	\$8.00 Fee Per Roughed-In Fixture/Item	No.	\$8.00 Fee Per Roughed-In Fixture/Item
	Water Closet (toilet)		Drinking Fountain
	Bathtub		Floor Sink or Drain
	Lavatory (wash basin)		Roof Drain
	Shower		Lawn Irrigation
	Kitchen Sink & Disposal		Janitor Sink
	Dishwasher		Water Conditioner
	Laundry Sink		Rough-in Future Fixtures
	Clothes washer	3	Sewer & Water
	Water Heater		

Subtotal of Fees.....(3-fixture minimum fee=\$24.00).....\$ _____

Surcharge (\$.050 for set fees up to \$1010 fees-more than \$1010 fees x .00005.....\$ _____

TOTAL PLUMBING PERMIT FEES.....\$ _____

Signature of Applicant _____ Date _____

FOR INSPECTIONS CALL 320-249-7533 A DAY IN ADVANCE
 This is an application only. Permit will be issued after City approval and payment of fees.
 Call GOPHER STATE ONE-CALL at 1-800-252-1166 at least 48 hours before excavation.

Authorized Approval Signature _____ Date _____