

City of Centerville
PLUMBING/MUNICIPAL UTILITY CONNECTION PERMIT APPLICATION

Job Site Address: _____ Permit #: _____

Project Valuation: \$ _____ The Applicant is: Owner & Occupant Contractor
(must include material and labor costs ~ commercial only)

PROPERTY OWNER

Name: _____ Contact Person: _____

Address: _____ Unit #: _____

City: _____ State: _____ Zip Code: _____ Phone: _____

Email Address: _____

CONTRACTOR

Name: _____ Contact Person: _____

Address: _____ Number and Street Name _____ City _____ State _____ Zip _____

Phone: _____ Cell: _____ License #: _____

Email Address: _____ Fax #: _____

PERMIT TYPE

- Residential
- Commercial
- Other (specify) _____

TYPE OF WORK

- New
- Existing Building
- Replacement/Repair
- Demolish
- Reinspection Fee
- Other (specify) _____

WORK ITEMS

Please Indicate Number of Each Item:

_____ Backflow Preventer	_____ RPZ
_____ Bathtub	_____ Roof Drain
_____ Dishwasher	_____ Shower
_____ Drinking Fountain	_____ Sill Cock
_____ Fixture R.I. Only	_____ Sink
_____ Floor Drain	_____ Standpipe
_____ Garbage Disposal	_____ Urinal
_____ Laundry Tub	_____ Water Closet
_____ Lavatory	_____ Water Heater
_____ Water Meter	_____ Water Softener
_____ Other (specify) _____	

Special Fixtures

_____ Flammable Waste
_____ Grease Interceptor
_____ Sewer Ejector
_____ Other (specify) _____
_____ Sewer Line (Interior)
_____ Water Line (Interior)
_____ Water Service Line* \$ _____
_____ Sewer Conn. Line* \$ _____

* = Items that require an Escrow

The Undersigned acknowledges that this application has been read and that the above is correct and agrees to comply with all the ordinances/codes and laws of the City of Centerville.

Periodic and/or a final inspection of this work is required by the Minnesota State Building Code. It is the responsibility of the applicant to contact the City of Centerville Inspections Department at (651) 429-4750 to schedule and inspection.

Applicant's Signature: _____

Date: _____

RESIDENTIAL		FEES
Total Plumbing Units _____	X \$5.00 =	Fee: \$ _____
<i>\$40.00 Minimum (Residential) with \$1.00 State Surcharge</i>		State Surcharge: \$ _____
<i>Valuation (Actual cost of installation including labor, materials and cost of equipment ~ (Valuation x .02 or 2%)</i>		Permit Charge: \$ _____
Total State Surcharge is Calculated on Valuation x (.0005)	X .02 or 2% =	Fee: \$ _____
		State Surcharge: \$ _____
		Permit Charge: \$ _____

YOU MUST BE A CERTIFIED PIPELAYER TO COMPLETE A WATER SERVICE LINE OR SEWER CONNECTION LINE

SEWER		WATER	
<input type="checkbox"/> Calculated MCES Units =	_____	<input type="checkbox"/> Water Lateral Charge *1	\$ _____
<input type="checkbox"/> Sewer Lateral Charge *1	\$ _____	<input type="checkbox"/> Water Trunk Fee	\$ _____
<input type="checkbox"/> Sewer Trunk Fees	\$ _____	<input type="checkbox"/> Water Meter	\$ _____
<input type="checkbox"/> MCES Sewer Fee	\$ _____	<input type="checkbox"/> Permit Fee	\$ _____
<input type="checkbox"/> Permit Fee	\$ _____	Total Water Fees	\$ _____
Total Sewer Fees \$ _____			

*1 Lateral charge where not previously assessed

Required Inspections	Comments
<input type="checkbox"/> Final <input type="checkbox"/> Plumbing R.I. & Air Test <input type="checkbox"/> Plumbing R.I. ~ Below Grade <input type="checkbox"/> Plumbing R.I. ~ Visual <input type="checkbox"/> Rain Water Leader R.I. <input type="checkbox"/> Service lines before covering trench	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

Issued by: _____

Date: _____

City of Centerville
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 Centerville, MN 55038
www.centervillemn.com

Building Inspections
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 Email: dschmitz@centervillemn.com