

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
_____ Bathtub
_____ Dishwasher
_____ Drinking Fountain
_____ Fixture R.I. Only
_____ Floor Drain
_____ Garbage Disposal
_____ Laundry Tub
_____ Lavatory
_____ Water Meter
_____ Other (specify) _____

_____ RPZ
_____ Roof Drain
_____ Shower
_____ Sill Cock
_____ Sink
_____ Standpipe
_____ Urinal
_____ Water Closet
_____ Water Heater
_____ Water Softener

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
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Total Plumbing Units _____	X \$5.00 =	Fee:	\$ _____
		State Surcharge:	\$ _____
		Permit Charge:	\$ _____

\$40.00 Minimum (Residential) with \$1.00 State Surcharge

COMMERCIAL	FEES
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Valuation (Actual cost of installation including labor, materials and cost of equipment ~ (Valuation x .02 or 2%)	X .02 or 2% =	Fee:	\$ _____
Total State Surcharge is Calculated on Valuation x (.0005)		State Surcharge:	\$ _____
		Permit Charge:	\$ _____

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

SEWER
<input type="checkbox"/> Calculated MCES Units = _____ <input type="checkbox"/> Sewer Lateral Charge *1 \$ _____ <input type="checkbox"/> Sewer Trunk Fees \$ _____ <input type="checkbox"/> MCES Sewer Fee \$ _____ <input type="checkbox"/> Permit Fee \$ _____ <div style="text-align: right;">Total Sewer Fees \$ _____</div>

WATER
<input type="checkbox"/> Water Lateral Charge *1 \$ _____ <input type="checkbox"/> Water Trunk Fee \$ _____ <input type="checkbox"/> Water Meter \$ _____ <input type="checkbox"/> Permit Fee \$ _____ <div style="text-align: right;">Total Water Fees \$ _____</div>

*1 Lateral charge where not previously assessed

Required Inspections
<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

Comments

Issued by: _____

Date: _____

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

Building Inspections
 2085 W. Cedar Street
 Centerville, MN 55038
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 Email: dschmitz@centervillemn.com