



**City of La Crescent  
Building Safety Department**

315 Main Street  
La Crescent, MN 55947  
Phone: (507) 895-4409  
Fax: (507) 895-8694

**PLUMBING  
Permit Application**

Office Use Only  
Permit. No. \_\_\_\_\_

Date \_\_\_\_\_ Building Permit Application No. \_\_\_\_\_  
(If this work is associated with a building permit)

Tenant/Building Name \_\_\_\_\_

Site Address \_\_\_\_\_  
Number Street Suite/Unit No.

Subdivision and/or Addition	Block	Lot	Plat	Parcel

Applicant is:  Owner  Contractor  Other (describe) \_\_\_\_\_

**Property Owner**

Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Last First MI

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Contractor**

Company \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_ MN Master Lic. # \_\_\_\_\_  
Last First MI

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Work Category**  
(check one)

New  Alterations  Move/Relocate  
 Addition  Tenant Finish  Repair/Replacement

**Permit Type**

Residential  Commercial

**Project Description**

Description of Work \_\_\_\_\_

\_\_\_\_\_

**Permit Fees**

1. Application Fee \$ 10.00  
2. State Surcharge \$ 5.00

3. Fixture Fee \_\_\_\_\_ \$5.00 times fixture number from back of page  
\$15.00 if only alteration or repair of water line.  
\$15.00 if only alteration or repair of drainage or waste line.

**Total Fees** \_\_\_\_\_  
Total of #1, 2 and 3 above

PLEASE CONTINUE ON OTHER SIDE

<b>Fixtures</b> Provide total number of each fixture indicated.	_____ Bathtub _____ Clothes Washer _____ Dishwasher _____ Drinking Fountain _____ Floor Drain _____ Laundry Tray _____ Lavatory _____ Lawn Sprinkler _____ Atmos. Vac. Breaker _____ Pot & Scullery Sink _____ Barwaste Opening _____ Press. Vac. Breaker _____ Water and/or Sewer Con. _____ Roof Drains _____ Double Check Valve	_____ RPZ Backflow Preventer _____ Sewer Ejector _____ Shower Stall _____ Sink _____ Sump Pump _____ Urinal _____ Water Closet _____ Water Heater _____ Water Softener _____ Dental Units _____ Disposal _____ Flammable Waste Separator _____ Sterilizer _____ Other _____ _____ Other _____
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<b>Water/ Sewer Information</b>	<input type="checkbox"/> City Water <input type="checkbox"/> City Sewer	<input type="checkbox"/> Well <input type="checkbox"/> Septic  Building Main Water Supply Size _____
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*I hereby apply for a plumbing permit and I certify that the information above is complete and accurate. The work will be in conformance with applicable laws of the State of Minnesota and ordinances of the City of La Crescent. I understand this is not a permit but only an application for a permit, and work is not to start without a permit. I certify that the work will be in accordance with all permit conditions and approved plans (in the case of work which requires a review and approval of plans).*

*I hereby certify that I am properly registered and/or licensed as required by the State of Minnesota and/or the City of La Crescent Anyone not so licensed may do work on premises or that part of premises (not containing more than two units) owned and actually occupied by the worker as a residence.*

\_\_\_\_\_

Applicant's Signature Date

**Whenever any work for which a plumbing permit is required has been commenced without first obtaining said permit, an investigation fee, in addition to the permit fee, shall be collected, whether or not a permit is then or subsequently issued, The investigation fee shall be equal to the amount of the permit fee as shown above.**

**City of La Crescent Plumbing Permit Application**