



PLUMBING PERMIT APPLICATION

CITY OF DAYTON
 12260 S DIAMOND LAKE ROAD
 DAYTON, MN 55327
 763-427-4589
 METRO WEST INSPECTION SERVICES, INC.
 763-479-1720

Office Use Only
_____ Permit Number
_____ Permit Expiration
_____ Date Received

SITE ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TENANT: _____ JOB COST: \$ _____

THE APPLICANT IS: RESIDENT OWNER CONTRACTOR

RESIDENT OWNER	NAME _____		
	ADDRESS _____		
	CITY _____	STATE _____	ZIP _____
	DAYTIME PHONE # WHERE YOU CAN BE REACHED _____		
CONTRACTOR	COMPANY NAME _____ LICENSE # _____		
	ADDRESS _____		
	CITY _____	STATE _____	ZIP _____
	CONTACT NAME _____		
	DAYTIME PHONE # WHERE YOU CAN BE REACHED _____		
PERMIT TYPE	COMMERCIAL ONLY <input type="checkbox"/> COMM PLMBG SYSTEM <input type="checkbox"/> COMM/MULTI-FAMILY LAWN SPRINKLER <input type="checkbox"/> FIRE SPRINKLER <input type="checkbox"/> RPZ	RESIDENTIAL <input type="checkbox"/> LAWN SPRINKLER <input type="checkbox"/> WATER SOFTENER <input type="checkbox"/> WATER HEATER	ONLY <input type="checkbox"/> INSIDE PLBG CONVERSION <input type="checkbox"/> ADDN/REPAIR <input type="checkbox"/> MISC
TYPE OF WORK	<input type="checkbox"/> NEW <input type="checkbox"/> REPAIR	<input type="checkbox"/> ADDITION <input type="checkbox"/> REPLACE	<input type="checkbox"/> ALTER / REMODEL <input type="checkbox"/> DEMOLITION

JOB DESCRIPTION _____ # OF FIXTURES _____

RESIDENTIAL FEES:

Repairs or Remodel \$50.00 + 5.00 Surcharge + \$5.00 per fixture

COMMERCIAL FEES: 1% of Contract Cost Plus Surcharge.

(Minimum of \$300 for New Construction and \$150 for Remodel)

MISCELLANEOUS _____

THE UNDERSIGNED HEREBY AGREES THAT, IN CASE SUCH PERMIT IS GRANTED, THAT ALL WORK WHICH SHALL BE DONE AND ALL MATERIALS WHICH SHALL BE USED SHALL COMPLY WITH THE PLANS AND SPECIFICATIONS HEREWITH SUBMITTED AND WITH ALL THE ORDINANCES OF SAID CITY OF DAYTON APPLICABLE HERETO.

Applicant's Signature _____

Date _____

OFFICE USE

SYSTEM TYPE:

- ____NEW
- ____ADDITION
- ____REPAIR
- ____DEMOLISH
- ____REPLACE
- ____ALTER/REMODEL

INSPECTIONS:

- ____ROUGH-IN
- ____FINAL
- ____RPZ TEST REPORT
- ____COMBUSTION AIR
- ____

PERMIT FEE:

- PERMIT FEE: \$ _____
- SURCHARGE: \$ _____
- OTHER: \$ _____
- SOFTWARE SURCHARGE: \$ _____
- TOTAL:** \$ _____

INSPECTOR: _____ DATE: _____

COMMENTS: _____
