



**CITY OF MAPLEWOOD**  
**Building Department**  
 1902 County Road B East Maplewood, MN 55109  
 Phone (651)249-2300 Fax (651)249-2319  
 www.MaplewoodMN.gov

Permit # \_\_\_\_\_

## 2019 Plumbing Permit Application

**Job Address:** \_\_\_\_\_ **Job Site Name:** \_\_\_\_\_

**Property Owner:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Contractor:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**Contractor Phone #:** \_\_\_\_\_ **Lead Cert # (if built pre-1978):** \_\_\_\_\_

**Contractor E-Mail:** \_\_\_\_\_

### Residential

Site built pre-1978  Yes  No

Fixture	Quantity
Water closet (toilet)	
Laundry Tray	
Floor Drain	
Washer	
Bath Tub	
Shower Bath	
Water Heater	
Garbage Disposal	
Kitchen Sink	
Wash Basin (sink)	
Dishwasher	
Water Softener	
Other	
<b>Total Fixtures</b>	
<b>Surtax</b>	<b>1.00</b>
<b>Total Residential Fee</b>	

### Commercial

**Description of work:**

\_\_\_\_\_

**Job valuation \$** \_\_\_\_\_

**Valuation x .0215 + \$91 =** \_\_\_\_\_

**Surtax (.0005 x valuation) =** \_\_\_\_\_  
 (.50 min)

**Total Commercial Fee = \$** \_\_\_\_\_



**Residential minimum fee is \$45 plus \$1.00 surtax. This includes one opening. Add \$10 for each additional opening.**

The undersigned makes application for a permit to do plumbing work as herein specified and agrees to do the work in accordance with all applicable code requirements.

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**City approved by**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Applicant (Printed)**

\_\_\_\_\_  
**Date**