

Building  
Inspections  
763-572-3604  
763-502-4977 FAX

**PLUMBING**  
**COMMERCIAL APPLICATION**  
**CITY OF FRIDLEY**

Permit No.: \_\_\_\_\_  
Received By: \_\_\_\_\_  
Date Rec'd: \_\_\_\_\_

EFFECTIVE 1-1-2018

DATE \_\_\_\_\_ YOUR E-MAIL ADDRESS \_\_\_\_\_  
SITE ADDRESS \_\_\_\_\_  
TENANT \_\_\_\_\_ SUITE NO. \_\_\_\_\_

**PROPERTY OWNER/TENANT**  
NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE: \_\_\_\_\_

**CONTRACTOR**  
SUBMIT A COPY OF YOUR STATE LICENSE, BOND AND CERTIFICATE OF INSURANCE  
NAME: \_\_\_\_\_  
STATE LICENSE **PM** # \_\_\_\_\_ EXP DATE \_\_\_\_\_  
CONTRACTOR # (**PC OR PB**) \_\_\_\_\_ EXP DATE \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ FAX \_\_\_\_\_

**PERMIT TYPE**  
 INSTITUTIONAL                       MULTI-FAMILY                       SWIMMING POOL  
 TOWNHOUSE                           COMMERCIAL/INDUSTRIAL                       OTHER

**TYPE OF WORK:**     NEW                                       REPLACEMENT                                       ALTERATION/REMODEL

DETAILED DESCRIPTION OF WORK \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FIXTURES: (INDICATE TOTAL NUMBER OF EACH)

___ CLOTHES WASHER	___ FLOOR DRAINS	___ RPZ VALVE	___ URINAL
___ DISHWASHER	___ GAS PIPING	___ BACKFLOW PREV.	___ WATER HEATER
___ DRINKING FOUNTAIN	___ GREASE TRAP	___ ROOF DRAINS	___ WATER METER
___ FAUCET	___ KITCHEN SINK	___ SHOWER	___ WATER PIPING
___ FLAMMABLE WASTE TANK	___ LAUNDRY TRAY	___ SLOP SINK	___ WATER SOFTENER
	___ LAVATORY	___ SWIMMING POOL	___ WATER CLOSET

<b>Total Job Valuation</b>	\$ _____	All fees are based on valuation, including the cost of labor and materials.
Permit Fee	\$ _____	(1.25% of Job Valuation / Minimum fee: \$35)
Surcharge	\$ _____	Valuation X .0005 or Minimum .50
Total Due	\$ _____	Make Checks Payable to: <b>City of Fridley</b>

THIS IS AN APPLICATION FOR A PERMIT-NOT VALID UNTIL PROCESSED

I hereby apply for a plumbing permit and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes of the City of Fridley and with the Minnesota Construction Codes; that I understand this is not a permit but only an application for a permit and work is not to start without a permit on site; that the work will be in accordance with the approved plan in the case of all work which requires review and approval of plans.

SIGNATURE OF APPLICANT : \_\_\_\_\_ PRINT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

APPROVAL INSPECTOR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PLEASE NOTE: SEPARATE PERMITS ARE REQUIRED FOR BUILDING, ELECTRICAL AND MECHANICAL WORK

**City of Fridley Building Inspections Department**  
7071 University Avenue NE, Fridley, MN 55432  
763-572-3604                      FAX: 763-502-4977