



1245 W Hwy 96 * Arden Hills MN 55112
 Phone 651.792.7800 * Fax 651.634.5137
 Email: CD@cityofardenhills.org

Permit # _____

PLUMBING PERMIT APPLICATION

Licensing Requirements:

Interior Work: All contractors must provide a copy of their current state license **AND** bond.
 Exterior Work: Current state license and bond; **OR** pipe layer's card.

Date Plans Submitted: _____
 Date Applicant Notified: _____

Property Information

Property Address:		Bldg./Suite/Location (commercial projects only):	
Owner Name:		Owner Phone Number:	
Email Address:	City:	State:	Zip:

Applicant/Contractor Information

Applicant Type: Primary Owner (Owner Affidavit Form Required) Contractor; License # _____ Verified

Company Name (contractors only):		Company Email Address:	
Mailing Address:	City:	State:	Zip:
Contact Name:	Contact Office Phone Number:	Contact Cell Number:	

Property Use	Construction Type	Type of Work		
<input type="checkbox"/> Commercial <input type="checkbox"/> Public <input type="checkbox"/> Single family	<input type="checkbox"/> Addition <input type="checkbox"/> New <input type="checkbox"/> Remodel <input type="checkbox"/> Replacement	<input type="checkbox"/> Backflow Preventer (new only) <input type="checkbox"/> Bar <input type="checkbox"/> Bathroom	<input type="checkbox"/> Drain <input type="checkbox"/> Kitchen <input type="checkbox"/> Laundry <input type="checkbox"/> Water Heater	<input type="checkbox"/> Water Softener <input type="checkbox"/> Valve Change <input type="checkbox"/> Other* (complete Describe Work section)

Project Details

Describe Work:	Expected Completion Date:	Project Value: (including labor and materials) \$
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IMPORTANT NOTICE: Applicant must attach 1 site plan and 2 sets of building plans for all applications requiring plan review. Min. 24 hour notice required for all inspections. There is a 10 working day turnaround for all permits requiring plan review. Separate permits are required for electrical, plumbing, heating, ventilation, or air conditioning. This permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work has commenced. By signing this application, you hereby certify that you have read and examined this application and know the same to be true and correct. All provision of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction. Applicant takes full responsibility for all work performed. Applicant is responsible for all plan check fees if permit is cancelled or withdrawn.

Fees

Permit Fee – Residential 1¼% of project value (\$60 minimum fee)	\$
Permit Fee – Commercial/Industrial/Public 1¼% of project value + \$50	\$
State Surcharge .0005 x PROJECT VALUE	\$
	\$
TOTAL PERMIT FEE▶ (Min. Permit Fee \$60 + surcharge)	\$

Applicant Signature _____ Date _____