



Plumbing Permit

CITY OF LONG LAKE
450 Virginia Avenue, PO Box 606
Long Lake, MN 55356
Phone / 952.473.6961

Permit #P _____

PERMIT APPLICATIONS MAY BE EMAILED TO:
jmoeller@longlakemn.gov

CITY STAFF
PLACE SIGNED ORIGINAL IN PERMIT FOLDER

COPIES TO:
APPLICANT, ASSESSOR, BUILDING OFFICIAL,
ACCOUNTING, PROPERTY FILE

FOR OFFICE USE ONLY

Amount Due: \$ _____
Date Paid: _____
[] Check # _____
[] Credit Card
[] Cash Receipt # _____
LOC / Bond(s) Required?
[] Yes [] No
Date Posted: _____

X Building Official / Staff Signature

Date Issued _____

COMMENTS _____

Permit Fee Calculation	
Permit Fee	\$ _____
Plan Check Fee	\$ _____
State Surcharge	\$ _____
Penalty	\$ _____
Other (DESCRIBE BELOW)	\$ _____
TOTAL DUE	\$ _____

**** PERMIT HOLDER: TO SCHEDULE INSPECTIONS, PLEASE CALL METRO WEST INSPECTION SERVICES AT (763) 479-1720 ****

Site Information

Site Address (INCLUDE SUITE #) _____ Property ID # _____

Legal Description Lot _____, Block _____ Subdivision/Addition _____

Permit Request – INCOMPLETE APPLICATION WILL NOT BE ACCEPTED

Owner Information	Contractor Information
Name _____	Name _____
Address _____	Address _____
City/State/Zip _____	City/State/Zip _____
Phone _____	Phone _____ License # _____

Project Information	Type of Building [] New Construction [] Addition [] Alteration [] Repair			
	PROJECT VALUATION \$ _____	Estimated Completion Date _____		
	ON THE LINES NEXT TO EACH FIXTURE, PLEASE RECORD THE NUMBER OF ITEMS TO BE INSTALLED / COMPLETED:			
___ Toilet	___ Kitchen Sink/Disposal	___ Water Softener	___ Vacuum Breaker	
___ Urinal	___ Dishwasher	___ Water Heater	___ Lawn Sprinkler System	
___ Bathtub	___ Laundry Tray	___ Slop Sink	___ Roof Leader / Rainwater	
___ Wash Basin	___ Clothes Washer	___ Floor Sink or Drain	___ Sump	
___ Shower	___ Drinking Fountain	___ Waste Interceptor	___ Rough-in Future Fixture	
___ Water Connection	___ Sewer Connection	___ Other _____		

Certification / Acknowledgement – Work must be inspected before it is covered, 24 hours notice is required. Permits may be issued ONLY to licensed plumbing contractors or to property owners residing in the dwelling. This permit shall be void if the work authorized is not commenced within 180 days of the date of issuance or if work is suspended for a period of 180 days. Term of permit is 12 months from date of issue. This permit may be revoked at any time upon violation of any provisions of Code. Applicant agrees that if a permit is granted, all work and materials used shall comply with the City Code of Long Lake.

X Applicant Signature _____ **Applicant Is:** [] Owner [] Contractor **Date** _____

Purchase of Meter Equipment & Miscellaneous – TO BE COMPLETED ONLY BY CITY STAFF IF APPLICABLE

Please note that the cost of equipment to be purchased will be the same as the cost to the City for purchase of meter equipment to be resold. Meter equipment is available by order only, unless already in stock. Additional permit fee applies for meter installation.

___ 5/8" Meter w/Fittings
___ 1" Meter w/Fittings
___ Other _____

Total Meters/Misc Fee = \$ _____
METER # _____
MIU # _____