

CITY OF MOORHEAD BUILDING CODES
 500 CENTER AVENUE / PO BOX 779 / MOORHEAD, MINNESOTA 56561
 PHONE: 218.299.5424
 E-MAIL: buildingcodes@moorheadmn.gov

PLUMBING PERMIT APPLICATION

CLASSIFICATION OF WORK: Residential Multiple Commercial Industrial

SITE	Project Title		
	Project Site Address		

OWNER	Owner	Contact Person	
	Owner Address	Phone Number	
	City, State, Zip	Fax Number	

CONTRACTOR	Contractor	Contact Person	
	Contractor Address	Phone Number	
		Email	
	City, State, Zip	Fax Number	License Number (If Applicable)

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of Fixtures _____ Water _____ Sewer _____ Water Heater _____

Brief Description of Work:

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Delivery of Permit (check one): Mail _____ Fax _____ Pickup _____ Email _____

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Fax Number for Permit Delivery:

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Email Address for Permit Delivery:

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I hereby apply for a Plumbing Permit and acknowledge that the information above is complete and accurate; that this is not a permit; that the work will be performed in accordance with the conditions of the permit, the approved plans and specifications, and the Minnesota State Building Code; and, that I will cause the work to remain accessible and exposed for inspection purposes.

Applicant Signature	Date
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