

PLUMBING PERMIT APPLICATION METROPOLITAN AIRPORTS COMMISSION

6040-28th AVENUE SOUTH
MINNEAPOLIS, MN 55450
612-467-0425 (ph) 612-713-7440 (fx)

<u>OFFICE USE ONLY</u> <u>PERMIT</u> <u>NUMBER:</u> _____
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DATE: _____ MAC NUMBER: _____

SITE ADDRESS: _____

Job Cost: \$ _____

APPLICANT IS: CONTRACTOR ARCHITECT ENGINEER OTHER

PROPERTY OWNER/TENANT:

NAME: _____

ADDRESS: _____

CITY: _____ ST _____ ZIP CODE: _____

CONTACT PERSON: _____ PHONE NUMBER: _____

FAX NUMBER: _____

CONTRACTOR

NAME: _____

ADDRESS: _____

CITY: _____ ST _____ ZIP CODE _____

CONTACT PERSON _____ PHONE NUMBER _____

License Number _____ FAX NUMBER: _____

ARCHITECT/ENGINEER

NAME _____

ADDRESS _____

CITY _____ ST _____ ZIP CODE _____

CONTACT PERSON _____ PHONE NUMBER _____

FAX NUMBER: _____

REGISTRATION NUMBER

Class of Work New Addition Alteration/Remodel Maintenance/Repair/Replace

TYPE OF STRUCTURE-CHECK ONE ONLY

- | |
|--|
| <input type="checkbox"/> OFFICES, BANKS, PROFESSIONAL
<input type="checkbox"/> STORES, RESTAURANTS, WAREHOUSE
<input type="checkbox"/> HOTELS, MOTELS
<input type="checkbox"/> PARKING GARAGE
<input type="checkbox"/> OTHER NON HOUSEKEEPING SHELTER
<input type="checkbox"/> INDUSTRIAL BUILDINGS
<input type="checkbox"/> PUBLIC WORKS/UTILITIES BUILDING |
|--|

- | |
|---|
| <input type="checkbox"/> CHURCHES/RELIGIOUS BUILDINGS
<input type="checkbox"/> HOSPITAL AND INSTITUTIONAL BUILDINGS
<input type="checkbox"/> SERVICE STATIONS/REPAIR GARAGE
<input type="checkbox"/> RECREATIONAL, AMUSEMENT
<input type="checkbox"/> OTHER NON-RESIDENTIAL
<input type="checkbox"/> FENCES, SIGNS, ANTENNAS
<input type="checkbox"/> OTHER NON-BUILDING STRUCTURES |
|---|

GAS UNIT (BURNERS) SIZE: _____ BTU's GAS PIPING UP TO 2" DIAMETER: NUMBER OF

OPENINGS _____

OVER 2" DIAMETER: NUMBER OF OPENINGS _____

TANKS	QUANTITY	GAS PIPING
ABOVE GROUND		<input type="checkbox"/> YES <input type="checkbox"/> NO
BELOW GROUND		<input type="checkbox"/> YES <input type="checkbox"/> NO
PERMANENT PROPANE STORAGE		<input type="checkbox"/> YES <input type="checkbox"/> NO
PROPANE VAPORIZERS		<input type="checkbox"/> YES <input type="checkbox"/> NO
TEMPORARY UNITS		

PLEASE COMPLETE OTHER SIDE

PLUMBING ITEMS (S) INDICATE QUANTITY FOR EACH

PLUMBING ITEM	QTY	PLUMBING ITEM	QTY
BATHTUB W/SHOWER		PLASTER INTERCEPTOR	
BATHTUB W/O SHOWER		PRESSURE V. BREAKER	
EYE WASH		R.P.Z.	
CLOTHES DRYER		RAINWATER LEADER	
CLOTHES WASHER		ROOF AREA DRAIN	
COFFEEMAKER		SEWAGE EJECTOR	
DENTAL CHAIR		SEWER & WASTE (UNDERGROUND)	
DISHWASHER		SHOWER (GANG TYPE) PER UNIT	
DISPOSAL		SILLCOCK/HOSE BIB	
DRINKING FOUNTAIN		SINK-BAR	
FLAMMABLE WASTE TRAP (CATCH BASIN)		SINK-HAND WASH/LAVATORY	
FLOOR DRAIN		SINK-KITCHEN	
FOOD COLD CASE(CONDENSATE LINE)		SINK-PREP	
GARBAGE DISPOSAL		SINK-THREE COMPARTMENT	
GREASE INTERCEPTOR		STANDPIPE	
GROUND RUN (NEW OR EXISTING)		URINAL	
ICE MACHINE		WATER CLOSET	
INDIRECT WASTE		WATER FILTER	
LAUNDRY TUB		WATER HEATER	
LAWN SPRINKLER, ANTI-SIPHON SYSTEM		WATER PIPE(UNDERGROUND)	
NEUTRALIZING TANK		WATER SOFTENER	
OTHER		WATER SUPPLY (EXT. OR ALT.)	
		WHIRLPOOL	

FEES = 2% OF JOB COST

DESCRIPTION OF WORK _____

DOES PROJECT INVOLVE FOOD, BEVERAGE, VENDING STORAGE/ PREPARATION? <input type="checkbox"/> YES <input type="checkbox"/> NO

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 METROPOLITAN AIRPORTS COMMISSION AND WITH THE MINNESOTA PLUMBING CODE; THAT I UNDERSTAND THIS IS NOT A PERMIT BUT ONLY AN APPLICATION FOR A PERMIT AND WORK IS NOT TO START WITHOUT A PERMIT; THAT THE WORK WILL BE IN ACCORDANCE WITH THE APPROVED PLAN IN THE CASE OF ALL WORK WHICH REQUIRES REVIEW AND APPROVAL OF PLANS.

APPLICANT'S SIGNATURE **DATE**

OFFICE USE ONLY

CONDITIONS OF ISSUANCE: _____

OTHER FEES? YES NO PLEASE SPECIFY _____ **AMOUNT \$** _____

PERMIT APPLICATION APPROVED BY: _____ **DATE:** _____

PERMIT PROCESSED BY: _____ **DATE:** _____