# Plumbing Permit Application

8080 Mitchell Road, Eden Prairie, MN 55344-2230
Building Department (952) 949-8342

**INSPECTIONS ONLY (952) 949-8341**

**Date** _____ **Permit No.** _____

| | |
|---|---|
| **Site Address** | _____Suite#_____ |

**Applicant**: Owner ____ Contractor ____ Title: _____

| | |
|---|---|
| **Owner's Name Or Tenant's Name** | Name/Company _____ Phone No. _____<br>Address _____<br>City _____ State _____ Zip _____ |
| **Contractor** | **Office**<br>Company _____ Phone No. _____<br>Contractor License No.: _____ Expiration Date _____<br>Contact Person (Print) _____ Phone No. _____<br>Address _____<br>City _____ State _____ Zip _____ |

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|---|---|
| **Plumbing Permit Type:** | ☐ - Sump I & I_____ |

**NOTE: Permit Fee $35.00 + $5.00 (State Surcharge) = $40.00**

**DESCRIPTION OF WORK:**_____

**Make Checks Payable to: City of Eden Prairie**
**When you pay by check, the City of Eden Prairie will present the check for payment to your bank electronically. Your original check will be destroyed once processed and you will not receive your cancelled check back.**

**This permit shall be null and void if authorized work is not started within 180 days or if work is suspended or abandoned for 180 days or more after work is started.**

The undersigned hereby represents upon all of the penalties of the law, for the purpose of including the City of Eden Prairie to take the action herein requested, that all statements are true, and that all work herein will be done in accordance with the ordinances of the City of Eden Prairie and the State of Minnesota.

_____/_____
Applicant's Signature Date

**Permit Approved By**: **Date Approved:**

_____ _____