



Plumbing Permit

350 Highway 7, Ste 230 • Excelsior, MN 55331
(952) 653-3674

Permit#: _____

Email permit to: permits@excelsiormn.org

NOTE: If the property for which a permit is being applied has an address that starts with more than three digits, it is not in Excelsior. Please check with the owner to verify which city their utility bills come from.

Project Address:

Property Owner:

Owner Phone:

Owner Address:

Owner Email Address:

Applicant is: Owner Contractor

Type of Property: Commercial Residential

Contractor Name:

Contractor Address:

Contractor City & Zip Code:

Contractor Email Address:

Contractor's License:

Contractor Phone:

Completion Date:

Estimated Value:

FIXTURE	BASEMENT	1ST FLOOR	2ND FLOOR	OTHER
Back Flow Preventer				
Bath Tub				
Bidet				
Disposal				
Lawn Sprinkler				
Roof Area Drain				
Sewage Ejector				
Shower				
Sink				
Sump Pump				
Urinals				
Washer/Clothes				
Washer/Dish				
Wash Tray				
Water Closet				
*Water Heater				
Water Piping				
*Water Softener				
Other				
Other				
Other				
TOTAL FIXTURES				

Fees

Residential Base Permit Fee: \$40.00
 \$8.50 Per Residential Fixture
 Commercial Based on Valuation
 Per Building Permit Schedule

Permit Fee: \$ _____
 Plan Review \$ _____
 State Surcharge \$ _____
 [.0005 X Value - Min. \$.50; Flat Permit Fee \$1.00]

Total \$ _____

Please call MetroWest Inspections at 763-479-1720 when ready for inspection.

The undersigned agrees to do all work in conformance with City Ordinances and rulings of the Inspection Division and herewith declares that all facts and representations on this application are true and correct and agrees to contact MetroWest Inspections when ready for an inspection.

Applicant Signature:

Date:

Building Official Approval if Applicable:

Date:

FOR OFFICE USE ONLY: Fee Paid Cash Check # _____ Date: _____