

# City of Mound

2415 Wilshire Blvd.  
Mound, MN 55364  
City: 952-472-0600 MNSPECT: 952-442-7520

# COMMERCIAL PLUMBING PERMIT AND PLAN REVIEW APPLICATION

Permit Number: \_\_\_\_\_

Project (site) Address \_\_\_\_\_ Owner's Phone \_\_\_\_\_

Business Name \_\_\_\_\_ Owner's Name \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Owner's Address \_\_\_\_\_

Plumbing Contractor/Designer \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Email \_\_\_\_\_

Bond Number: \_\_\_\_\_ Plumbing License Number: \_\_\_\_\_

New Const.  Addition  Alteration  Replacement / EST VALUATION OF WORK:\$ \_\_\_\_\_

Project Description: \_\_\_\_\_

### Building Service Information:

Sewer:  New Municipal  Existing Municipal  New On-Site Septic  Existing On-Site

Water:  New Municipal  Existing Municipal  New Private Well  Existing Private Well

**Please indicate ALL fixtures included in this permit:**

- |                             |                         |                                 |
|-----------------------------|-------------------------|---------------------------------|
| _____ Water Closet (toilet) | _____ Bathtub           | _____ Floor Sink                |
| _____ Lavatory (wash basin) | _____ Shower            | _____ Piping/Treating Equipment |
| _____ Kitchen Sink & Disp.  | _____ Dishwasher        | _____ Catch Basin               |
| _____ Laundry Tray          | _____ Clothes Washer    | _____ Vacuum Breakers           |
| _____ Water Heater          | _____ Water Softener    | _____ Lawn Sprinkler System     |
| _____ Urinal                | _____ Drinking Fountain | _____ Roof Leader-Rainwater     |
| _____ Rough-in Future Fix.  | _____ Sump              | _____ Septic Tank & Drain Field |
| _____ Misc. Fixtures        | _____ Floor Drain       | _____ Water Piping System       |

Total Number
Of Fixtures
_____

Signature of this application by the legal property owner or a licensed contractor, as the owner's representative is required and authorizes the Municipality Zoning Administrator or designee and the Municipality Building Official or designee to enter upon the property to perform needed inspections. Entry may be without prior notice. I hereby acknowledge that I have read this application and state that all information is true and correct to the best of my knowledge. I further agree that all work performed will be in accordance with approved plans, specifications and conditions, and to abide by all of the ordinances of the Municipality and the Laws of the State of Minnesota regarding actions taken pursuant to this permit, I agree to pay all plan review fees even if I choose not to proceed with the work. I certify that this plumbing system was designed in accordance with the Minnesota Plumbing Code (as amended) to the best of my abilities, and I agree to forward the report and plans to the installer of the system.

Signature \_\_\_\_\_ Print Signature Name \_\_\_\_\_ Date \_\_\_\_\_

Approved valuation: \_\_\_\_\_

Permit Fee .....	_____
Code Review .....	_____
State Surcharge .....	_____
License Look Up .....	_____
Other .....	_____
<b>Total Permit Charge \$</b>	<b>_____</b>

Permit issued by:
_____
Date: _____

**THIS PAGE MUST ACCOMPANY ALL COMMERCIAL PLUMBING PERMIT APPLICATIONS**

The following check list has been compiled to assist in expediting the commercial plan review and permit issuance process. Please take a moment to review these submittal requirements and to verify all of the necessary documentation prior to submitting your project.

**PLUMBING PERMIT and PLUMBING PLAN REVIEW – THE FOLLOWING ITEMS ARE REQUIRED:**

- 2 (two) sets of Signed Plumbing Plans
- Utility Site Plan / Floor Plan / Roof Plan
- Water Riser / Soil, Waste, Vent Riser Diagrams
- Plumbing Specifications
- Copy of Plumbers License/Bond
- Completed permit application including:
  - Date
  - Site Address (including Suite #) and Name of Project
  - Owner
  - Owner Address
  - Telephone Number
  - Contractor Information (if applicable)
  - Description of work being performed
  - Valuation of work being performed
  - Signature of applicant
- Complete and provide Service Water Heating compliance form for compliance with the Minnesota State Energy Code (see attached)

**PLUMBING PLAN REVIEW – Please provide the following information:**

Choose one of the following:

**Building Sewer and/or Water Service Only** (this fee applies when no interior plumbing is to be installed)  
**\$150 flat fee** \_\_\_\_\_

**Plumbing System** (Water distribution and drain/waste/vent systems within the building, and water and/or sewer service connections, if applicable).

This portion of the fee is based on total number of drainage fixture units (DFU)

**Total DFU** \_\_\_\_\_

- a. 25 or fewer DFU **\$ 150** \_\_\_\_\_
- b. 26 to 50 DFU **\$ 250** \_\_\_\_\_
- c. 51 to 150 DFU **\$ 350** \_\_\_\_\_
- d. 151 to 249 DFU **\$ 500** \_\_\_\_\_
- e. 250 or more DFU: **\$3 x** \_\_\_ DFU **\$** \_\_\_\_\_ **Maximum \$4,000**

**Interceptors/Separators** (grease interceptors, flammable water interceptors, etc...)  
 \_\_\_\_\_ x \$70 = \$ \_\_\_\_\_ or  None

**Storm Drainage System** **\$150** \_\_\_\_\_ **minimum OR**  
 Each internal roof drain opening (\$500 max.) \_\_\_\_\_ x \$50 = \$ \_\_\_\_\_ or  None **AND/OR**  
 Each storm water interceptor, separator, or catch basin design \_\_\_\_\_ x \$70 = \$ \_\_\_\_\_ or  None

**Manufactured Home Park or Campground**

- a. 25 or fewer sites **\$ 300** \_\_\_\_\_ c. 51 to 125 sites **\$ 400** \_\_\_\_\_
- b. 26 to 50 sites **\$ 350** \_\_\_\_\_ d. 125 or more sites **\$ 500** \_\_\_\_\_

**TOTAL PLUMBING PLAN REVIEW \$** \_\_\_\_\_