

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)

of Fixtures _____ Water _____ Sewer _____ Water Heater _____

Brief Description of Work:

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

Fax Number for Permit Delivery:

Email Address for Permit Delivery:

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