

Building Use Commercial Residential **Application Number: PRPL20** _____

Property Address _____ Unit/Suite _____

Business/Tenant Name (if applicable) _____

APPLICANT	Property Owner	Owner Name(s) _____
		Address _____
		City _____ State _____ Zip _____
		E-mail Address _____
		Contact Phone (____) ____ - _____ Alternate Phone (____) ____ - _____
	<input type="checkbox"/> Homesteaded - owner lives in home, is applying as own contractor, and is taking responsibility for the work.	
	Licensed Contractor	Plumbing Contractor License No.: PC _____ (on file at MN Dept. of Labor & Industry)
		Business Name _____
		Address _____
		City _____ State _____ Zip _____
E-mail Address _____		
Applicant Name _____ Contact Phone (____) ____ - _____		

Work Description _____

Work Items

- Gas < 99,000 BTU (e.g. gas water heater, stove, dryer, grill, gas fireplace)
- Plumbing
- RPZ – How many? _____ **Copies of separate reports for each RPZ must be submitted with this application.**

The undersigned hereby represents and acknowledges, under all penalties of law, that this application is not a permit, and that, for the purpose of allowing the City of Bloomington to take the action herein requested, all statements are true, and that all work herein will be done in accordance with the ordinances of the City of Bloomington, the State of Minnesota, and other applicable regulations.

Applicant Signature _____ Date Signed ____/____/____

Fee Calculation

Job Valuation \$ _____ (includes only cost of plumbing related materials and labor)

Permit Fee \$ _____ = Job Valuation x 2% (minimum \$55 residential; or \$65 commercial)

State Surcharge \$ _____ = Job Valuation x .0005

Plan Check Fee \$ _____ = Permit Fee x 10% (only when job valuation is over \$50,000)

Total Fees Due \$ _____

We accept payment by Visa, Master Card, and Discover or by check payable to City of Bloomington.

Continue to page 2

THIS SECTION TO BE COMPLETED BY COMMUNITY DEVELOPMENT STAFF ONLY

Conditions of Issuance _____

Reviewed Electronically-Office plans are in Cityview

Approval Signature _____ **Date Approved** ____/____/____