

# City of Alexandria Plumbing Permit Application

704 Broadway  
Alexandria, MN 56308

320.763.6678  
fax 320.763.3511  
email [permits@alexandriamn.city](mailto:permits@alexandriamn.city)

Site Address \_\_\_\_\_  
Property Owner \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Parcel Number \_\_\_\_\_  
Estimated Start Date \_\_\_\_\_  
Estimated Completion Date \_\_\_\_\_  
Estimated Cost \_\_\_\_\_

The contractor hereby makes application for a permit to do the plumbing work as herein specified, agreeing to do all such work in strict accordance with the State Plumbing Code, the City Ordinances, and the regulations of the Board of Public Works.

## Plumbing Contractor Information

Company Name \_\_\_\_\_ License # \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Contact Person \_\_\_\_\_ Phone \_\_\_\_\_ Date \_\_\_\_\_  
Comments \_\_\_\_\_

## Building Use

Single Family  Two-Family  Multi-Family Townhouse  Commercial  Industrial  Institutional  Tax Exempt  Accessory  Misc. Structure

## Building Type

New  Old  Frame  Brick  Concrete

## Installations

Fixtures	B	1	2	3	4
Bathtub					
Shower					
Lavatory					
Water Closet					
Urinal					
Sinks					
Basins					
Laundry Trays					
Drinking Fountain					
Floor Drains					
Miscellaneous					

Water Main Connection Material \_\_\_\_\_  
Water Meter \_\_\_\_\_  
Capping the Old Well \_\_\_\_\_  
Sewer Main Connection Material \_\_\_\_\_  
Septic Tank \_\_\_\_\_  
Cesspool \_\_\_\_\_  
Repair or Alteration \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_