

City of Oronoco PLUMBING / WATER SERVICE PERMIT APPLICATION



(Submit to City of Oronoco Upon Completion)

Fee: _____ Date Paid: _____ Permit No. _____

Date _____					
Tenant/Building Name _____					
Site Address _____					
Number		Street		Suite/Unit No. Zip Code	
City	Subdivision and/or Addition			Block	Lot
				Plat	Parcel
Applicant is: <input type="checkbox"/> Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Other (describe) _____					
Property Owner	Name _____ Phone (____) _____ <div style="display: flex; justify-content: space-between; font-size: small;"> Last First MI Work/Home </div> Address _____ City _____ State _____ Zip Code _____				
Sewer & Drain Licensed Contractor/ Other	Company _____ Phone (____) _____ <div style="display: flex; justify-content: space-between; font-size: small;"> Work/Mobile </div> Name _____ Contr. No. _____ Address _____ Master Lic. No. _____ City _____ State _____ Zip Code _____				
Engineer/ Designer Licensed Plumber	Company _____ Phone (____) _____ <div style="display: flex; justify-content: space-between; font-size: small;"> Work/Mobile </div> Name _____ Registration No. _____ <div style="display: flex; justify-content: space-between; font-size: small;"> Last First MI (State of MN) </div> Address _____ City _____ State _____ Zip Code _____				
Work Category	<input type="checkbox"/> Water Meter Only <input type="checkbox"/> Water Service & Meter				
Permit Type	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial				
Description of Work _____ _____ _____					
Total Valuation of Work \$ _____ Permit Fee _____ Surcharge _____ Total _____					

PLEASE CONTINUE ON OTHER SIDE

