



**City of Austin**  
**500 Fourth Avenue N.E.**  
**Austin, Minnesota 55912-3773**  
**Building Department**  
 507-437-9950 Fax 507-437-7101

FOR OFFICE USE ONLY

 Permit No(s): \_\_\_\_\_  
 Date Issued: \_\_\_\_\_  
 Receipt No: \_\_\_\_\_ Check No.: \_\_\_\_\_  
 Receipt Date: \_\_\_\_\_

## Plumbing or Excavation Permit Application

**(All information must be completed or permit will not be issued)**

Date: \_\_\_\_\_  
 Site Address: \_\_\_\_\_  
 Owner Name: \_\_\_\_\_  
 City: Austin State MN ZIP 55912  
 Telephone Number: \_\_\_\_\_

**APPLICANT: CONTRACTOR OR OWNER (circle one)**

 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_

PROJECT DESCRIPTION: \_\_\_\_\_

Total Project Valuation(s): \$ \_\_\_\_\_

**Residential Fees**

<input type="checkbox"/> New House .....	\$99.50 + \$1.00 s/c = \$100.50	\$ _____ + \$ _____ s/c
<input type="checkbox"/> Additions, Alterations, Repairs .....	\$74.50 + \$1.00 s/c = \$ 75.50	\$ _____ + \$ _____ s/c
<input type="checkbox"/> Water Heater .....	\$54.50 + \$1.00 s/c = \$ 55.50	\$ _____ + \$ _____ s/c
<input type="checkbox"/> Water Softener .....	\$39.50 + \$1.00 s/c = \$ 40.50	\$ _____ + \$ _____ s/c
<input type="checkbox"/> Service Line Alterations .....	\$74.50 + \$1.00 s/c = \$ 75.50	\$ _____ + \$ _____ s/c
<input type="checkbox"/> Sanitary Sewer Access Connection Fee .....	\$750/unit = \$750.00	\$ _____
Investigation Fees (Pay 2nd permit fee).....	\$ _____	\$ _____
		<b>\$ _____ + \$ _____ s/c</b>

**TOTAL PERMIT FEES = \$ \_\_\_\_\_**

**Plumbing Commercial Fees**

Permit	Contract Price \$ _____ x .01 =	\$ _____
State Surcharge	Contract Price \$ _____ x .0005 =	\$ _____
Sanitary Sewer Access Connection Fee	- \$750.00 per REU (20 fixture units) =	\$ _____
<b>TOTAL</b>	<b>(Minimum \$74.50 + \$1.00 s/c = \$75.50)=</b>	<b>\$ _____</b>

This form and the fee must be submitted to the City of Austin, 500 4<sup>th</sup> Avenue NE Austin, MN 55912  
PRIOR TO JOB STARTING

**I HEREBY CERTIFY** that the above information is correct and agree to comply with all applicable ordinances and codes of the City of Austin and laws of the State of Minnesota.

<b>CONTRACTOR OR OWNER</b>	<b>DATE</b>
.....	
For Office Use Only	
Permit Approval _____ Building Official	Date _____
Zoning Approval _____ Zoning Administrator	Date _____
Zoned _____ Flood Area _____	