

City of Watertown  
 309 Lewis Ave S, PO Box 279  
 Watertown, MN 55388  
 Phone (952) 955-2681 Fax (952) 955-2695

**PERMIT APPLICATION**

Building Permit # \_\_\_\_\_  
 PID # \_\_\_\_\_  
 Date Issued \_\_\_\_\_  
 Receipt # \_\_\_\_\_

GOVERNMENT DATA PRACTICES ACT – TENNISON WARNING: The data you supply on this form will be used to process the permit you are applying for. You are legally required to provide the data, but we will not be able to process the permit without it. The data will constitute a public record if and when the permit is granted.

Site Location \_\_\_\_\_ Date \_\_\_\_\_  
 Owner Name \_\_\_\_\_ Phone # \_\_\_\_\_  
 Contractor \_\_\_\_\_ License # \_\_\_\_\_  
 Address \_\_\_\_\_ Phone # \_\_\_\_\_  
 \*\*Lead Cert # \_\_\_\_\_

\*\*Is the home pre-1978?  Yes  No \*Does the project require lead remediation?  Yes  No If no, complete lead supplement form

Type of Work:  Residential  Commercial

Valuation of Work \$ \_\_\_\_\_

Permit Type:

- |                                        |                                           |                                       |                                          |
|----------------------------------------|-------------------------------------------|---------------------------------------|------------------------------------------|
| <input type="radio"/> New Construction | <input type="radio"/> Accessory Structure | <input type="radio"/> Pool            | <input type="radio"/> Fire Protection    |
| <input type="radio"/> Basement Finish  | <input type="radio"/> Fence               | <input type="radio"/> Plumbing        | <input type="radio"/> Sewer & Water      |
| <input type="radio"/> Remodel          | <input type="radio"/> Re-Roof             | <input type="radio"/> Mechanical      | <input type="radio"/> Tennant Alteration |
| <input type="radio"/> Addition _____   | <input type="radio"/> Re-Side             | <input type="radio"/> Demolition      | <input type="radio"/> Other _____        |
| <input type="radio"/> Deck             | <input type="radio"/> Window Replacement  | <input type="radio"/> Building Moving |                                          |

Description of Work \_\_\_\_\_

Signature of this application by the legal property owner or a licensed contractor, as the owner's representative, is required. I acknowledge that the information above is complete and accurate and the work will be done in accordance with the approved plans, specifications and conditions. I agree to abide by all ordinances of the City of Watertown and with the MN State Building Code. I understand this is not a permit but an application for a permit and work is not to start without a permit.

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

Signature of (please check one):  Owner  Contractor  Other

**OFFICE USE:**

Valuation \$ \_\_\_\_\_  
 Permit Fee \$ \_\_\_\_\_  
 Plan Review \$ \_\_\_\_\_  
 City Lead Surcharge \$ \_\_\_\_\_  
 State Surcharge \$ \_\_\_\_\_  
 Site Inspection Fee \$ \_\_\_\_\_  
 SEC Fee \$ \_\_\_\_\_  
 Sewer Inspection Fee \$ \_\_\_\_\_  
 Water Inspection Fee \$ \_\_\_\_\_  
 Water Meter \$ \_\_\_\_\_  
 Storm Water Fee \$ \_\_\_\_\_  
 Park Dedication Fee \$ \_\_\_\_\_  
 Other \_\_\_\_\_ \$ \_\_\_\_\_  
 Other \_\_\_\_\_ \$ \_\_\_\_\_  
**TOTAL DUE \$ \_\_\_\_\_**

**INSPECTIONS:**

- Site   
 Footing/Foundation   
 Framing   
 Insulation   
 Wallboard   
 Reroof/Photos   
 Reside/Photos   
 Stucco   
 Cultured Stone   
 Other \_\_\_\_\_   
 Final

Construction Code:

- IBC  IRC

Construction Type \_\_\_\_\_  
 Occupancy \_\_\_\_\_  
 Square Footage \_\_\_\_\_  
 Sprinklers \_\_\_\_\_  
 Zoning District \_\_\_\_\_  
 Floodplain Elevation \_\_\_\_\_

<b>Setbacks:</b>	Actual	Required
Front	_____	_____
Rear	_____	_____
Side	_____	_____
Side	_____	_____

**Approvals:**

Planning \_\_\_\_\_  
 Engineering \_\_\_\_\_  
 Public Works \_\_\_\_\_  
 Fire \_\_\_\_\_

Permit Approved By: \_\_\_\_\_

Date Approved: \_\_\_\_\_

**MECHANICAL PERMIT INFORMATION**

Permit # \_\_\_\_\_

Contractor \_\_\_\_\_ License # \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Valuation of Work \$ \_\_\_\_\_

Work Type  New  Replacement

Fuel Type  Gas  LP  Electric  Wood  Oil

System Type  HVAC  Refrigeration  Gas Piping  Fireplace

Manufacturer \_\_\_\_\_ Model No. \_\_\_\_\_

Value Size \_\_\_\_\_ Ton \_\_\_\_\_ HP \_\_\_\_\_

Written Description \_\_\_\_\_

<b><u>Computation of Fees:</u></b>	<b><u>\$ Amount/Fee</u></b>	<b><u>Subtotal</u></b>
New Single Family home heating/cooling	\$100.00 (fixed fee)	\$ _____
\$1.00 to \$2,500 valuation	\$50.00 (fixed fee)	\$ _____
\$2,500 to \$50,000 valuation	2% of valuation	\$ _____
\$50,000 and up	\$1,000 + 1% of valuation in excess of \$50,000	\$ _____
State Surcharge	\$5.00 if permit is fixed fee	\$ _____
	.0005 x valuation of work up to \$1,000,000	\$ _____
Plan Review Fee (when submittal documents are required)	10% of permit fee	\$ _____
	<b>TOTAL</b>	<b>\$ _____</b>

**OFFICE USE:**

Required Inspections  Rough-In  Final  Air Test  ORSAT

Approvals Required  Fire  Planning  Public Works  Other \_\_\_\_\_

Conditions of Issuance \_\_\_\_\_

**PLUMBING PERMIT INFORMATION**

Permit # \_\_\_\_\_

Contractor \_\_\_\_\_ License # \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Work Type  New  Replacement

Valuation of Work \$ \_\_\_\_\_

Written Description \_\_\_\_\_

<b><u>Computation of Fees:</u></b>	<b><u>\$ Amount/Fee</u></b>	<b><u>Subtotal</u></b>
New Single Family home plumbing permit	\$100.00 (fixed fee)	\$ _____
\$1.00 to \$2,500 valuation	\$50.00 (fixed fee)	\$ _____
\$2,500 to \$50,000 valuation	2% of valuation	\$ _____
\$50,000 and up	\$1,000 + 1% of valuation in excess of \$50,000	\$ _____
State Surcharge	\$5.00 if permit is fixed fee	\$ _____
	.0005 x valuation of work up to \$1,000,000	\$ _____
Plan Review Fee (when submittal documents are required)	10% of permit fee	\$ _____
	<b>TOTAL</b>	<b>\$ _____</b>

**OFFICE USE:**

Required Inspections  Rough-In  Final  Air Test  ORSAT

Approvals Required  Fire  Health  Other \_\_\_\_\_

Conditions of Issuance \_\_\_\_\_