



# CITY OF GEM LAKE, MN

4200 Otter Lake Road  
Gem Lake, MN 55110-3227



Telephone 651-747-2790

E-mail [City@gemlakeMN.org](mailto:City@gemlakeMN.org)

## PLUMBING PERMIT APPLICATION

Property  
Owner \_\_\_\_\_  
Site Address \_\_\_\_\_  
Owner Phone # \_\_\_\_\_

Contractor \_\_\_\_\_  
State License # \_\_\_\_\_  
Address \_\_\_\_\_  
City/State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Cell \_\_\_\_\_ Other \_\_\_\_\_

**Type of Building:**     Residential     Commercial

**Type of Construction:**     New     Remodel

Water Closet	Washing Machine	Garbage Disposal	Boiler
Water Softener	Shower	Kitchen Sink	R.P.Z.
Laundry Tray	Bath	Wash Basin	Gas Pipe
Floor Drain	Water Heater	Dishwasher	Other

*(1<sup>st</sup> Fixture \$25.00, Addl. Fixtures/\$10.00 ea. and Surcharge established by the State of MN)*

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

I assume full responsibility for the progress and completion of the work authorized by this permit. This permit becomes null and void if work is not commenced within 180 days, or if work is suspended for a period of 180 days at any time after work is commenced.

**All General Contractors and all Sub-Contractors performing work in connection with this permit are required to be licensed by the State of Minnesota or the City of Gem Lake.**

Applicant  
Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>Office Use Only</b>	
Building Occupancy/Use _____	Type of Construction _____
Approved by _____	Date _____
_____	