



2nd Floor Civic Centre
 103 Main Street South
 PO Box 1072
 Minnedosa, MB
 R0J 1E0
 204-867-2364

Plumbing Permit Application

Serving: Town of Minnedosa • RM of Minto-Odanah

To complete the fillable form, click on drop-down selectors or place cursor in the blue highlight areas to enter data.

Town of Minnedosa Assessment Roll #:	RM of Minto-Odanah Assessment Roll #:
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OWNER INFORMATION	
Name(s):	
Mailing Address:	
Email Address:	Phone #:
<i>* An application may be filed by any person other than the owner, but only if that person also provides written authorization by the owner(s) to file an application for this property.</i>	

APPLICANT INFORMATION	SAME AS OWNER
Name(s):	
Mailing Address:	
Email Address:	Phone #:

LICENCED PLUMBER	SAME AS OWNER	NOT LICENCED
Name:		
Mailing Address:		
Email Address:	Phone #:	

LEGAL DESCRIPTION OF PROPERTY AND LAND LOCATION								
Section:	NW	NE	SW	SE	Section:	Township:	Range:	WPM
— OR —								
Lot(s):	Block:	Plan No.:	Lot Size:					
BETWEEN: Cross Street:				and Cross Street:				
Property Zoning:								
Street Address:								
<i>Street Address, Town, Province and Postal Code</i>								

BUSINESS NAME
Include Business Name:

OCCUPANCY GROUP/DIVISION
Occupancy Group/Division:

BUILDING TYPE
Building Type:

CLASS OF WORK			
New	Renovation	Repair	Addition
Alteration	Relocation	Excavation	Install

APPLICABLE FIXTURES				
Please fill chart below with number of applicable fixtures on each respective floor of the building:				
	Basement	1st Floor	2nd Floor	3rd Floor
Fixtures				
Bathtub / Shower				
Laundry Tray / Clothes Washer				
Water Closet (Toilet)				
SINKS	Lavatory			
	Kitchen			
	Bar			
	3-Compartment			
	Janitor Mop			
	Laundry Tub / Basin			
	Floor Drain			
Roof Drain				
Eye Wash Station				
Drinking Fountain				
Urinal				
Grit / Grease / Oil Interceptor				
OTHER				
Total Number of Fixtures:				

ESTIMATED VALUE OF PROJECT / WORK: \$
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DECLARATION

The undersigned hereby applies for a Plumbing Permit in accordance with this application, all by-laws and regulations applicable thereto. The accuracy of the above information and the accompanying plans and specifications with the representations therein contained are the responsibility of the owners and are hereby made a part of this application.

Owner/Applicant's Signature

Owner/Applicant's Signature

Date (YYYY-MM-DD)

Date (YYYY-MM-DD)

To electronically sign this document, click on a signature field. A "digital signature identity" is required; you will be prompted to create one if you do not already have one set up in Adobe Acrobat.

WHEN PROPERLY VALIDATED BELOW, THIS IS YOUR PLUMBING PERMIT

FOR OFFICE USE ONLY

OTHER INFORMATION / NOTES *(up to 600 characters)*

FEES

Basic Application Fee: \$

PLUS Fixture Fees Amount: @ \$ each = \$

\$ Other — Explanation:

Total Fees Due: \$

Payment Method: Receipt No.:

Plumbing Permit No.: Corresponding Building Permit No.:

Date Completed Application Received: (YYYY-MM-DD)

Development Officer Signature:

Date Completed Application Approved: (YYYY-MM-DD)

Scan File MMO Permit-LV Stats Can CMHC