



City Of Wyoming - Department Of Building Safety

26885 Forest Blvd, PO Box 188

Wyoming, MN 55092

Phone (651) 462-4947

permits@wyomingmn.org

PLUMBING PERMIT APPLICATION

Date _____ Structure Used As _____

Owner _____ Phone # _____

Site Address _____
Address City State Zip

Legal Description: Lot _____ Block _____ Section _____ Township 33N Range 21W Zone _____
 Subdivision _____ PIN Number R21.

Plumbing Contractor: Name _____ License # _____

Homeowner

Contact _____ Phone _____

Address _____

Email _____

Job Description _____ Estimated Cost \$ _____

Number of each item listed below:

- | | | |
|---------------------------------|-------------------------------------|---------------------------------------|
| Water Closet (Toilet) _____ | Dishwasher _____ | Laundry Trays _____ |
| Bath Tub _____ | Garbage Disposal _____ | Floor Drain _____ |
| Whirlpool Tub _____ | Kitchen Sink _____ | Sewer Line _____ |
| Urinal _____ | Drinking Fountain _____ | Water Line _____ |
| Bidet _____ | Catch Basins _____ | Lawn Sprinkler _____ |
| Lavatory (Bath Sink) _____ | Water Softener _____ | Standpipe _____ |
| Shower _____ | Sewage Ejector _____ | Hose Bib _____ |
| Grease Interceptor _____ | Backflow Preventer _____ | Garage Floor Drain _____ |
| Water Heater (List size) _____ | Oil/Flammable Waste Separator _____ | Cannot discharge into septic or sewer |
| Please Circle - Gas or Electric | | |

To install **gas piping** you must be licensed with the City of Wyoming: License # _____

The undersigned agrees to do all work in conformance with the Minnesota State Building Code and herewith declares that all facts and representations on this application are true and correct. **THE UNDERSIGNED AGREES TO NOTIFY THE INSPECTIONS DEPT. WHEN READY FOR INSPECTIONS.**

Applicant Signature

Date

This permit may be issued only to a licensed plumbing contractor or to an owner who occupies the single-family dwelling - MN Statute 326B.46

OFFICE USE ONLY

Required Inspections: Rough-In _____ / _____ / _____ Final _____ / _____ / _____

APPROVED / DISAPPROVED By _____ Date _____ / _____ / _____

Permit # _____