CITY OF STOCKTON	PERMIT APPLICATION		Meter Number:	
Applicant to complete shaded areas including signature.				
SITE ADDRESS	DATE			
LEGAL DESCRIPTION Lot:		Block:		
Addition:		Property I.D.#		
OWNER	Name / Address / City / State / Zip			
Phone:				
			PLUMBING PERMIT#	
PLUME	BING INFORMATION			
			State Plumbers License No.	
DI LIMBING CONTRACTOR	10.11.11.12.12.12.12.12.12.12.12.12.12.12.			
PLUMBING CONTRACTOR	Name / Address / City / State / Zip / Day	time Telephone		ESTIMATED VALUE
CLASS OF WORK: () New () Addition () A	l Alteration () Repair		
CEASS OF WORKS. () New (/ Addition () /	() Nepun		
Office Use Only:				
New House: \$50.00		Water Heater: \$10.00		
ISTS: \$30.00		Water Softner: \$15.00		
Repairs, Alteration, Additions: \$30.00		Manuf. Home: \$25.00		
Lawn Sprinkler System: \$30.00		Commercial price: .01		
Water Meter:		Water Access Charge:		
Total Plumbing Permit:	\$	Receipt No	Date:	
I hereby certify that I have completed and examined this application and certify that the information contained therein is correct.				
If a permit is issued, I agree all work will be done in conformance with all applicable ordinances and codes of the City of Stockton and laws of the State of Minnesota. I hereby certify that I am properly registered and/or licensed as required by the State of Minnesota				
laws of the State of Minnesota. I hereby certif	y that I am properly register	ed and/or licensed as required by t	ne State of Minnesota	
and Stockton City Ordinances.				
	Contractor			
CITY OF STOCKTON				
8600 D STREET				
STOCKTON, MN 55988				
PHONE: (507) 689-2005				