

City of Decorah Building Inspections Department

400 Claiborne Drive / P.O. Box 138

Decorah IA. 52101

Phone: (563) 382-3651

www.decorahia.org

Date Rec'd _____

Permit No. _____

Permit Fee: **\$100.00**

Plumbing Permit Application

Plumbing permit required on new construction and major remodel projects

A permit **MUST** be issued prior to commencement of work.

Please return to the City of Decorah Building Department or via email to gswanson@decorah.iowa.gov

Project address: _____ Addition _____ Block _____ Lot _____ Zone _____

If dwelling was built prior to 1978, please follow Federal EPA and Iowa Dept of Health lead guidelines and abatement rules.

Permit Applicant. Owner Plumber Contractor

Property Owner _____

Address _____ City/State/Zip _____

Phone_(_____) _____ Email _____

Plumber/Contractor (if not Property owner) _____

Address _____ City/State/Zip _____

Phone_(_____) _____ Email _____

State License/ID # _____

Engineer/Designer _____

Address _____ City/State/Zip _____

Phone_(_____) _____ Email _____

State License/ID # _____

Valuation of Work \$ _____ (include Labor and Material)

Description of Work: _____

Class of Work. New Addition Remodel Repair Residential Commercial Other

Type of Building _____

Notice: 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 this permit does not presume to give authority to violate or cancel the provision of any other state or local law regulating construction or the performance of construction. Any unapproved construction made herein shall make the application invalid.

Signature of Applicant

Date

For office use only

Building/ Zoning Approval Signature

Approval Date