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 Crystal, MN 55422  
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# Application for Sewer/Water/Storm Permit

Date \_\_\_\_\_ Permit No. \_\_\_\_\_ Rec'd By/Date \_\_\_\_\_

<b>Site Address</b>	_____
<b>Tenant/Bldg Name</b>	_____

**Applicant:** Owner \_\_\_\_\_ Contractor \_\_\_\_\_

<b>Property Owner</b>	Name/Company _____ Phone No. _____ Address _____ City _____ State _____ Zip _____
<b>Contractor</b>	Company _____ Phone No. _____ Contact Person (Print) _____ Phone No. _____ Address _____ City _____ State _____ Zip _____

<b>Sewer &amp; Water Permit Type:</b>	<input type="checkbox"/> 01 - Water <input type="checkbox"/> 02 - Sewer <input type="checkbox"/> 03 - Sewer & Water <input type="checkbox"/> 04 - Storm Sewer
<b>Work Type:</b>	<input type="checkbox"/> 01 - New <input type="checkbox"/> 04 - Repair <input type="checkbox"/> 10 - Disconnect
<b>Working in Right-Of-Way:</b>	<input type="checkbox"/> - No <input type="checkbox"/> - YES (Additional Public Works permit is required)
<b>Office Use Required Inspections</b>	<input type="checkbox"/> 20 - Rough In <input type="checkbox"/> 15 - Final

Water:	Pipe Size _____	Pipe Material _____
	Meter Size _____	Meter Nbr _____ Remote Nbr _____
Sanitary Sewer:	Pipe Size _____	Pipe Material _____
Storm Sewer:	Pipe Size _____	Pipe Material _____
	Connection To City System:	<input type="checkbox"/> Manhole <input type="checkbox"/> Catchbasin <input type="checkbox"/> Pipe
	Manholes Installed _____	Catchbasins Installed _____

Type of Use:  Single Family   
 Multi-Family   
 Commercial   
 Industrial

\* \* \* \* (Over) \* \* \* \*

Estimated Value of Work \$ \_\_\_\_\_

<b>Office Use Only</b>	
Permit Fee	\$ _____
State Surcharge Fee	\$ _____
Meter Fee	\$ _____
Remote Fee	\$ _____
Horn Fee	\$ _____
Sales Tax	\$ _____
Other	\$ _____
Total Fees	\$ _____

**This permit shall be null and void if authorized work is not started within 180 days or if work is suspended or abandoned for 180 days or more after work is started.**

The undersigned hereby certifies upon all of the penalties of the law, for the purpose of including the City of Crystal to take the action herein requested, that all statements on this application have been read and examined and are true and correct, and that all work whether specified herein or not will be done in accordance with the ordinances of the City of Crystal and the laws of the State of Minnesota.

\_\_\_\_\_/\_\_\_\_\_  
Applicant's Signature/Date

**Permit Approved By:**

**Date Approved:**

\_\_\_\_\_

\_\_\_\_\_