

## **Utility Connections**

250 South 4th Street – Room 222
Minneapolis, MN 55415
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Email PwUtility.Connections@minneapolismn.gov
www.minneapolismn.gov/publicworks/permits

## **Utility Connections and Meter Set Permit Application**

Job and Applicant Information								
Job Address:				Work Ty	Type: Resider		al Commercial	
Job Description (Scope of work):								
Applicant Name (Business name if cont		Contracto			Property Owner			
Address:			City:			State:	ZIP Code:	
Business Phone:	Email:							
Contact Name:	Contact Phone:							
Complete this section if not licensed under applicant's name.								
Master Plumber Name: License #								
Water Tap Permit (Complete the following section only if you need a Water Tap Permit)								
Permit Type: Extension	Repair	Tap Cut					Estimated Feet:	
New taps will require the creation of a cu	stomer billing account					<u>.</u>		
Account Holder Name: Address:								
Meter Set Permit (Complete the following section only if you need a Meter Set Permit)								
Established Metered Account New Construction								
Type: Fire Genera	: Fire General Supply Combination		Water Service Line Size:					
Sewer Tap Permit (Complete the following section only if you need a Sewer Tap Permit)								
Permit Type: Extension	Repair	Тар	Cut		Warra	anty Est	imated Feet:	
Storm Pipe Material:			Sanitary	Pipe Ma				
Pipe Size:				Pipe Siz	e:			
Utility Permit (Complete the following section only if you need a Utility Permit)								
Type of Utility: Franchise	Major Project	Pern	nit Fees " illed	P	aper Pla	ns	After Hours Work Planned	
Type of Construction: Chamb	er Trench	Hole	Borin	g	Con	duit	In Existing Conduit	
Portion of Right of Way Being Used:	Driving Lane	Park	ing Lane	В	oulevard	:	Sidewalk	
Number of Construction Days:	Start Date:		End Date:			Est	imated Feet:	
Excavation Permit (Complete the following section only if you need an Excavation Permit)								
Street Cut: New Permit	Existing Permit	Fra	ınchise	Permit Fe	ees Billed	i		
Estimated Excavation Size:	Length:	Wi	dth:					

## **CERTIFICATION STATEMENT**

By checking this box, I hereby certify that: I am authorized to make this application; all information provided on this application or in other submittals is true and accurate to the best of my knowledge; authorization from the owner to perform the proposed work has been granted; all work performed as part of any permit will comply with all applicable state and municipal laws and ordinances, and any required contractor license, personal license, or certificate of competency will be obtained prior to any work being performed. I understand that the issuance of a permit does not grant any contractor license, certificate of competency, business license, or other license, and unlicensed persons shall not be hired to perform work that requires a license or certificate of competency.