PLUMBING PERMIT APPLICATION

2017

Development Services
435 Ryman Street, Missoula, MT 59802
(406) 552-6635 Fax: (406) 552-6053

Permit #: _____

Issued Date: _____

INSPECTION REQUEST LINE (406) 552-6040 **Email: Permits@ci.missoula.mt.us** https://ebiz.ci.missoula.mt.us/citizenaccess/

INSTRUCTIONS - TYPE OR PRINT CLEARLY AND USE BLACK OR BLUE INK - NO PENCIL - The applicant must fill out sections I, II, and III. Your permit will not be processed if you do not fill out the required information. Please read all conditions on this application before signing. The property owner and/or licensed contractor must sign and date the application. If not applicable please write N/A (do not leave blank). When filling out addresses, please include ST, AVE, RD, DR, etc. and zip code. A separate permit application is required for each building or structure except townhouses or commercial tenant spaces where each unit requires a permit. If necessary, provide directions to the site, location of work within the building, and/or attach a map.

SECTION I: PROPERTY INFORMATION

PROJECT ADDRESS:

BLDG #: _____ SUITE #: _____
UNIT #: _____ APT #: _____
MOBILE HOME PARK NAME (IF APPLICABLE): _____

BUILDING OR STRUCTURE USE

RESIDENTIAL

☐ SINGLE FAMILY ☐ MULTI-FAMILY _____ UNITS
☐ DUPLEX ☐ STORAGE BUILDING
☐ TOWNHOUSE ☐ DETACHED GARAGE
☐ OTHER

COMMERCIAL

CHANGE OF USE ☐ - YES ☐ - NO
SPECIFY USE: _____
BUSINESS NAME: _____
BLDG PERMIT # _____

SECTION II: PEOPLE INFORMATION

PROPERTY OWNER

NAME: _____
ADDRESS: _____
CITY, ST, ZIP: _____
PHONE: _____
EMAIL: _____

CONTRACTOR - ☐ SAME AS OWNER

NAME: _____
ADDRESS: _____
CITY, ST, ZIP: _____
PHONE: _____
EMAIL: _____

SECTION III: PROPOSED WORK

PROJECT DESCRIPTION

CONDITIONS

APPLICATION FOR A PERMIT AND PAYMENT OF PROPER FEES MUST BE MADE PRIOR TO COMMENCEMENT OF WORK OR THE FEE WILL BE DOUBLED (SECTION 50-60-509, MCA). PERMIT SHALL BECOME NULL AND VOID IF WORK AUTHORIZED BY SUCH PERMIT IS NOT COMMENCED WITHIN 180 DAYS FROM ISSUANCE OR IF WORK IS SUSPENDED OR ABANDONED FOR A PEROD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED (UPC 103.3.4).

IT SHALL BE THE DUTY OF THE PERSON DOING THE WORK AUTHORIZED BY A PERMIT TO ASSURE THAT ALL REQUIRED INSPECTIONS ARE SCHEDULED AT LEAST 24 HOURS IN ADVANCE AND APPROVED BY THE CITY INSPECTORS. FURTHERMORE, IT SHALL BE THE DUTY OF THE PERSON REQUESTING THE INSPECTION TO PROVIDE ACCESS TO AND MEANS FOR INSPECTION OF THE WORK (UPC 103.5)

A HOMEOWNER MAY SECURE A PERMIT FOR AND PLUMB ONLY HIS OWN BUILDINGS USED FOR HIS OWN USE. BULDINGS USED AS RENTALS, BUSINESSES, ETC. AND ALL CONTRACT WORK MUST BE PERFORMED BY A LICENSED PLUMBING CONTRACTOR USING ONLY PLUMBERS LICENSED FOR SUCH WORK.

THE INDIVIDUAL WHO SIGNES THIS APPLICATION ASSUMES ALL RESPONSIBILITY AND LIABILITY FOR THE WORK PERFORMED AS SPECIFIED HEREIN.

SIGNATURE OF PROPERTY OWNER DATE

SIGNATURE OF PLUMBING CONTRACTOR DATE

SECTION IV: PERMIT FEES

☐	FOR ISSUING EACH PERMIT	$ 35.00
☐	FOR ISSUING EACH SUPPLEMENTAL PERMIT FOR WHICH THE ORIGINAL PERMIT IS NOT EXPIRED, CANCELLED OR COMPLETED (1)	$ 10.00

(1) YOU MAY NOT EXTEND ANOTHER APPLICANT'S PERMIT.

IN THE SPACES PROVIDED BELOW, PLEASE INDICATE THE TOTAL NUMBER OF INSTALLATIONS, RELOCATIONS OR REPLACEMENTS OF ANY FIXTURE, TRAP OR STUB-OUT FOR FUTURE USE. USE "OTHER" FOR ANY FIXTURE, TRAP OR STUB-OUT NOT INCLUDED ON THE SCHEDULE. THEN TOTAL THE NUMBER OF FIXTURES, TRAPS AND STUB-OUTS AND INDICATE THE TOTAL IN THE SCHEDULE OF FEES LOCATED BELOW THE SCHEDULE OF PLUMBING FIXTURES.

SCHEDULE OF PLUMBING FIXTURES

FIXTURE	#	FIXTURE	#
BATH TUB OR TUB/SHOWER COMBO		SERVICE/MOP BASIN	
SHOWER		KITCHEN SINK (COMMERCIAL)	
LAVATORY		KITCHEN PREP SINK	
WATER CLOSET (TOILET)		KITCHEN 3-COMPARTMENT SINK	
URINAL		KITCHEN HAND SINK	
BIDET		ROOF DRAIN	
KITCHEN SINK (DOMESTIC)		ICE MACHINE	
FLOOR SINK		GLASS FILL STATION	
BAR SINK		COFFEE MAKER	
DISHWASHER		DRINKING FOUNTAIN	
CLOTHES WASHER		DENTAL-UNIT CUSPIDOR	
WASH TRAY		FIREMAIN	
FLOOR DRAIN/SINK		OTHER 1 - SPECIFY	

#	TYPE OF WORK	EACH	TOTAL
	FOR EACH INSTALLATION, RELOCATION OR REPLACEMENT OF PLUMBING FIXTURE, TRAP OR STUB-OUT FROM ABOVE	$ 13.00	
	FOR EACH WATER HEATER OR REPLACEMENT (INCLUDES ON-DEMAND WATER HEATERS)	$ 13.00	
	FOR INSTALLATION, ALTERATION, OR REPAIR OF WATER PIPING AND/OR WATER TREATMENT EQUIPMENT	$ 13.00	
	FOR REPAIR OR ALTERATION OF DRAINAGE OR VENT PIPING	$ 13.00	
	FOR EACH LAWN SPRINKLER OR FIRE PROTECTION SYSTEM, OR ANY ONE METER, INCLUDING BACKFLOW PROTECTION DEVICE	$ 13.00	
	FOR ONE TO FOUR TOTAL UNPROTECTED PLUMBING FIXTURE, ETC., OR VACUUM BREAKER OR BACKFLOW PROTECTION DEVICE (EACH)	$ 13.00	
	FOR FIVE OR MORE UNPROTECTED PLUMBING FIXTURES, ETC., OR VACUUM BREAKER OR BACKFLOW PROTECTION DEVICE (EACH)	$ 5.00	
	FOR EACH INDUSTRIAL WATER PRE-TREATMENT EQUIPMENT INCLUDING ITS DRAINAGE AND VENT	$ 16.00	
	FOR EACH MEDICAL GAS & VACUUM PIPING SYSTEM SERVING ONE TO FIVE INLET(S), OUTLET(S) OR OPENING(S) FOR A SPECIFIC GAS	$ 116.00	
	FOR EACH ADDITIONAL MEDICAL GAS & VACUUM INLET(S), OUTLET(S) OR OPENING(S) OVER FIVE.	$ 12.00	
	FOR EACH GRAY WATER SYSTEM INSTALLATION	$ 83.00	

PENALTY FEE		TOTAL FEES
☐ CREDIT CARD	☐ CASH	☐ CHECK