



# CITY OF FALCON HEIGHTS

2077 W. Larpenteur Avenue, Falcon Heights, MN 55113

Fax: 651-792-7610

Email: [mail@falconheights.org](mailto:mail@falconheights.org)

Credit card charges will incur a  
2.95% convenience fee

For Internal Use Only:

Permit No. \_\_\_\_\_

Fee: \_\_\_\_\_

Surcharge: \_\_\_\_\_

Amount Received \_\_\_\_\_

Receipt No. \_\_\_\_\_

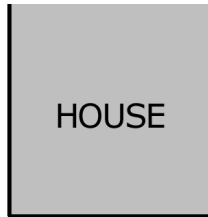
Date Issued: \_\_\_\_\_

## SEWER CONNECTION OR REPAIR PERMIT APPLICATION

Job Address		Parcel ID:
Property Owner	Mail Address	Phone
Contractor	Mail Address	Phone
Point of Contact/Applicant Name	Contractor Email	Mobile phone
Describe work		MN License/Bond #:
Kind of pipe used:	Size:	Length Installed:
Pitch	Depth of cover:	

### SKETCH OF INSTALLATION

(Write names of adjacent streets in space provided.)



**CONTRACTOR SIGNATURE** \_\_\_\_\_ DATE \_\_\_\_\_

**PUBLIC WORKS DIRECTOR SIGNATURE** \_\_\_\_\_ DATE \_\_\_\_\_

**PLUMBING INSPECTOR SIGNATURE** \_\_\_\_\_ DATE \_\_\_\_\_

Inspector's Remarks
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