City of North Muskegon
Plumbing Permit Application

PLEASE PRINT ALL INFORMATION

Job Information:

Date:_____

Job Address:_____ Job Value:_____

House Number and Street Name

Class of Work: ☐ New ☐ Addition ☐ Alteration ☐ Repair

☐ Residential ☐ Commercial ☐ Other Please Specify _____

Description of Work:_____

_____

Use of Bldg:_____Change Use to:_____

Sewer: ☐ Municipal ☐ Private **Water:** ☐ Municipal ☐ Private

Property Owner Information:

Cell Phone/Daytime Number (___)_____

Name:_____ Other Number (___) _____

Mailing Address:_____

Street City State Zip Code

Phone Number:___(_____)_____

Contractor Information:

Name:_____Mailing Address:_____

Daytime
Phone Number:(_____)_____ License Number_____

NOTICE

This permit becomes null and void if work or construction authorized is not commenced within sixty (60) days, or if construction or work is suspended or abandoned for a period of 120 days at any time after work is commenced.
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 a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction of the performance of construction.

Signature of Contractor (Or Agent):_____Date:_____

Signature of Owner (if owner is builder):_____Date:_____

For Department Use Only

Notes and Data:_____

_____

Plumbing Permit Number _____ Permit Fee _____

Approval Signature: _____ Date: _____