

Permit #: _____

Date Issued: _____

SEWER PERMIT APPLICATION (Allow 48 Hours to Process)

Job Address: _____

Owner: _____

This application is for a private sewer permit
at the above address to INSTALL REPAIR

This structure is NEW EXISTING

Are you working in the City Right-of-Way? YES NO

Is an Excavation Permit required? YES NO
Verify with Public Works 319-286-5802

SIGNATURE OF APPLICANT OR AUTHORIZED AGENT _____ DATE _____

COMPANY NAME _____

E-MAIL _____ PHONE _____

NOTE – READ CAREFULLY:

PERMIT FEE \$30.00

Except for the permit number, all portions of this form shall be completed by the applicant. Stamped signatures will not be accepted.

It is the responsibility of permittee to call for all inspections at 319-286-5831.

ALL WORK SHALL BE INSPECTED. No sewer work shall be concealed or covered until approved by the inspector. Work that has not been inspected and approved by the inspector shall be considered unapproved.

Permits are non-transferable. All work shall be performed by permittee or his employee. The permittee is assumed to be knowledgeable of the Cedar Rapids Plumbing Code. Any questions should be resolved prior to installation.

IF ANY WORK IS COVERED PRIOR TO INSPECTION A DOUBLE FEE WILL BE CHARGED.

Date Received (BSD): _____

Signature: _____

Date Received (PW): _____

Signature: _____