

City of Glencoe

1107 11th Street E, Suite 107

Glencoe, MN 55336

City: 320-864-5586 MNSPECT: 952-442-7520

COMMERCIAL PLUMBING PERMIT AND PLAN REVIEW APPLICATION

Permit Number: _____

Project (site) Address _____ Owner's Phone _____

Business Name _____ Owner's Name _____

City/State/Zip _____

Owner's Address _____

Plumbing Contractor/Designer _____ Phone _____

Address _____ City/State/Zip _____

Bond Number: _____ Plumbing License Number: _____

TYPE(S) OF WORK: ☐ New Construction ☐ Addition ☐ Remodel ☐ Replacement
☐ Food service/bar/lodging ☐ Hospital/Nursing Home

EST VALUATION OF WORK: \$ _____ **PROJECT DESCRIPTION:** _____

BUILDING SERVICE INFORMATION:

Sewer: ☐ New Municipal ☐ Existing Municipal ☐ New On-Site Septic ☐ Existing On-Site Septic

Water: ☐ New Municipal ☐ Existing Municipal ☐ New Private Well ☐ Existing Private Well

PLEASE INDICATE ALL FIXTURES INCLUDED IN THIS PERMIT:

_____ Water Closet (toilet)	_____ Bathtub	_____ Floor Sink	_____
_____ Lavatory (wash basin)	_____ Shower	_____ Piping/Treating Equipment	_____
_____ Kitchen Sink & Disp.	_____ Dishwasher	_____ Catch Basin	_____
_____ Laundry Tray	_____ Clothes Washer	_____ Vacuum Breakers	_____
_____ Water Heater	_____ Water Softener	_____ Lawn Sprinkler System	_____
_____ Urinal	_____ Drinking Fountain	_____ Roof Leader-Rainwater	_____
_____ Rough-in Future Fix.	_____ Sump	_____ Septic Tank & Drain Field	_____
_____ Misc. Fixtures	_____ Floor Drain	_____ Water Piping System	_____

Total DFU's _____

Total SFU's _____

Signature of this application by the legal property owner or a licensed contractor, as the owner's representative is required and authorizes the Municipality Zoning Administrator or designee and the Municipality Building Official or designee to enter upon the property to perform needed inspections. Entry may be without prior notice. I hereby acknowledge that I have read this application and state that all information is true and correct to the best of my knowledge. I further agree that all work performed will be in accordance with approved plans, specifications and conditions, and to abide by all of the ordinances of the Municipality and the Laws of the State of Minnesota regarding actions taken pursuant to this permit, I agree to pay all plan review fees even if I choose not to proceed with the work. I certify that this plumbing system was designed in accordance with the Minnesota Plumbing Code (as amended) to the best of my abilities, and I agree to forward the report and plans to the installer of the system.

Signature _____ Print Signature Name _____ Date _____

Approved valuation:

Permit Fee
Code Review
State Surcharge
Total Permit Charge \$ _____

Permit Charge:

SAC
WAC
Construction Meter
Meter
Additional Fees
Total Due \$ _____

Permit issued by: _____ Date: _____

THIS PAGE MUST ACCOMPANY ALL COMMERCIAL PLUMBING PERMIT APPLICATIONS

The following checklist has been compiled to assist in expediting the commercial plan review and permit issuance process. Please take a moment to review these submittal requirements and to verify all of the necessary documentation prior to submitting your project.

PLUMBING PERMIT and PLAN REVIEW – THE FOLLOWING ITEMS ARE REQUIRED:

- ☐ Completed permit application including:
 - ☐ Site Address (including Suite #) and Business Name
 - ☐ Owner
 - ☐ Owner Address
 - ☐ Telephone Number
 - ☐ Contractor Information (if applicable)
 - ☐ Valuation of work being performed
 - ☐ Description of work being performed
 - ☐ Signature of applicant
 - ☐ Date
- ☐ 2 sets of **Signed** Plumbing Plans
- ☐ Utility Site Plan / Floor Plan / Roof Plan
- ☐ Water Riser / Soil, Waste, Vent Riser Diagrams
- ☐ Plumbing Specifications
- ☐ Copy of Plumbers License/Bond
- ☐ Complete and provide Service Water Heating Compliance Forms for compliance with the Minnesota State Energy Code (<https://www.ashrae.org/standards-research--technology/standards-forms--procedures>)

PLUMBING PLAN REVIEW – Please provide the following information:

Choose one of the following:

- ☐ **Building Sewer and/or Water Service Only** (this fee applies when no interior plumbing is to be installed)
\$150 flat fee _____

- ☐ **Plumbing System** (Water distribution and drain/waste/vent systems within the building, and water and/or sewer service connections, if applicable).

This portion of the fee is based on total number of drainage fixture units (DFU)

Total DFU _____

- | | | |
|---------------------|-----------------|--------------------------|
| a. 25 or fewer DFU | \$ 150 | _____ |
| b. 26 to 50 DFU | \$ 250 | _____ |
| c. 51 to 150 DFU | \$ 350 | _____ |
| d. 151 to 249 DFU | \$ 500 | _____ |
| e. 250 or more DFU: | \$3 x _____ DFU | \$ _____ Maximum \$4,000 |

- ☐ **Interceptors/Separators** (grease interceptors, flammable water interceptors, etc...) _____ x \$70 = \$ _____ or ☐ None

- ☐ **Storm Drainage System** \$150 _____ minimum **OR**
Each internal roof drain opening (\$500 max.) _____ x \$50 = \$ _____ or ☐ None **AND/OR**
Each storm water interceptor, separator, or catch basin design _____ x \$70 = \$ _____ or ☐ None

- ☐ **Manufactured Home Park or Campground**

- | | | | | | |
|----------------------|--------|-------|----------------------|--------|-------|
| a. 25 or fewer sites | \$ 300 | _____ | c. 51 to 125 sites | \$ 400 | _____ |
| b. 26 to 50 sites | \$ 350 | _____ | d. 125 or more sites | \$ 500 | _____ |

TOTAL PLUMBING PLAN REVIEW \$ _____

PLUMBING PLAN REVIEW REQUIREMENTS – NEW CONSTRUCTION

Below is a list of requirements necessary to complete a review of plumbing systems in commercial buildings. Please read the following carefully to ensure you provide all required information to **minimize delays** in the plan review process.

1. **Utility Site Plan (if new services are to be installed):** The utility plan must show the locations, sizes and slopes of all sanitary sewer, all storm sewer, and water service piping within the property lines. If wells or sewage treatment systems will be located on the property, they must be shown on the plan so that proper isolation distances can be verified. The utility plan must indicate the pipe materials to be used for each service unless otherwise listed in the specifications. The plan must include a directional reference.
2. **Floor plan:** The floor plan must show the locations of all plumbing fixtures. The sizes and locations of all horizontal sanitary and storm piping must be shown on the plan.
3. **Water Riser Diagram:** The drawing must show an isometric view of the water distribution piping from the water service entrance to the connection to all plumbing fixtures and equipment. The plumbing fixtures, equipment connected to the water distribution system, and all pipe sizes must be clearly labeled on the drawing.
4. **Soil, Waste and Vent Riser Diagram:** The drawing must show an isometric view of the waste and vent piping within the building. All pipe sizes and fixtures must be clearly labeled on the drawing.
5. **Material Specifications:** A list of fixtures, materials, and procedures must be provided which includes the following:
 - a. A list of the fixtures and appurtenances that are connected to the potable water distribution system or that discharge to the sanitary waste system. The list must include manufacturer and model number of each plumbing fixture or appurtenance.
 - b. The type and quality standard (e.g. ASTM, ANSI, etc.) of the pipe materials to be used in the plumbing system, including the type of joints.
 - c. The pressure testing and disinfection procedures.
6. **Roof plan:** A roof plan must be provided *if roof drains will be installed that are piped inside the building*. If no internally piped roof drains will be installed, a roof plan is not necessary for plan review. A statement should be included that the roof is pitched and the building is served by scuppers.
7. **Signature:** All plumbing plans that are submitted to MNSPECT must be signed by a master plumber or a professional engineer who is registered in the State of Minnesota. **Signature and license number must be on each plan sheet.**

SAMPLE DIAGRAMS

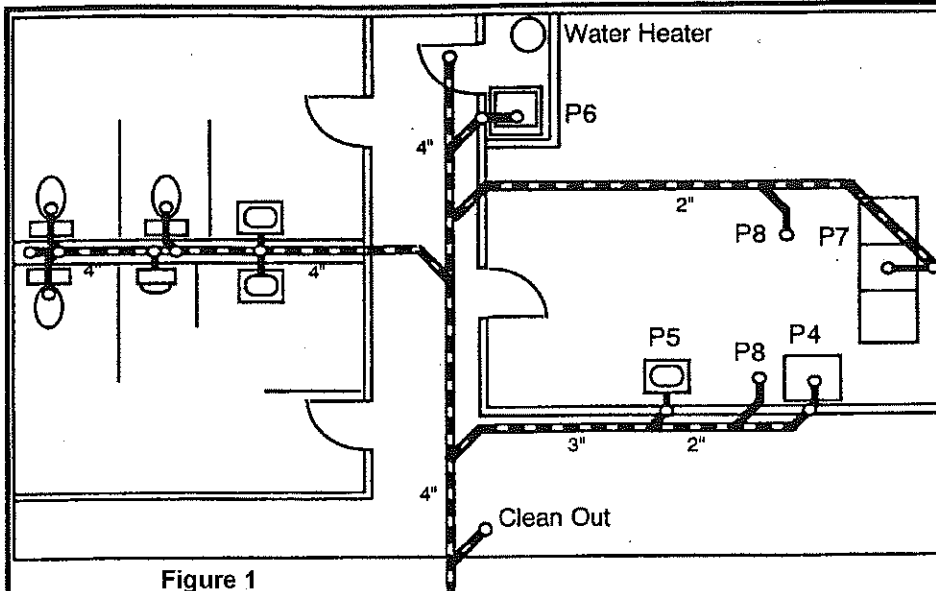


Figure 1
Floor Plan

- P1 Tank Water Closet
- P2 Lavatory
- P3 Urinal
- P4 Dishwasher
- P5 Hand Sink
- P6 Mop Sink
- P7 3-Compartment Sink
- P8 Floor Drain (without backwater valve)

Maximum Developed Length: 40 Feet
Pressure Range: 46 - 60 psi

Individual Branches 1/2" Unless
Otherwise Noted

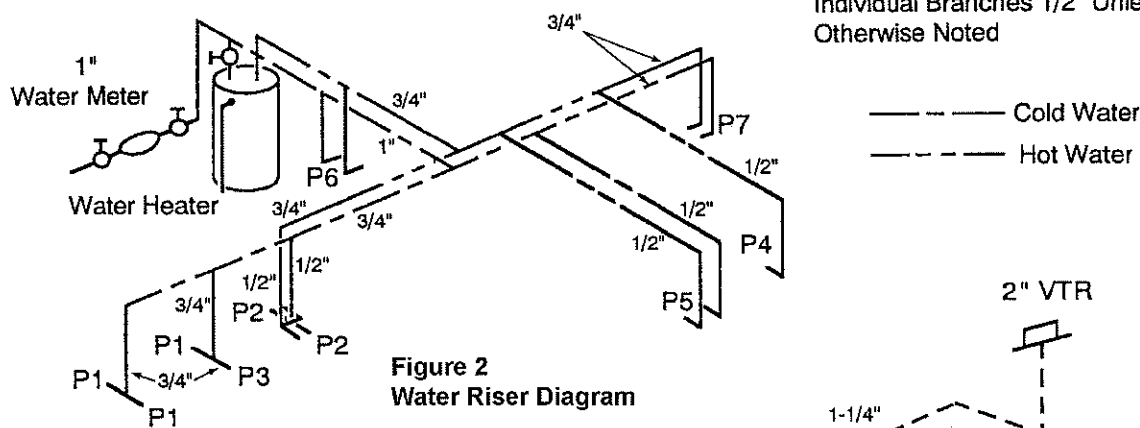


Figure 2
Water Riser Diagram

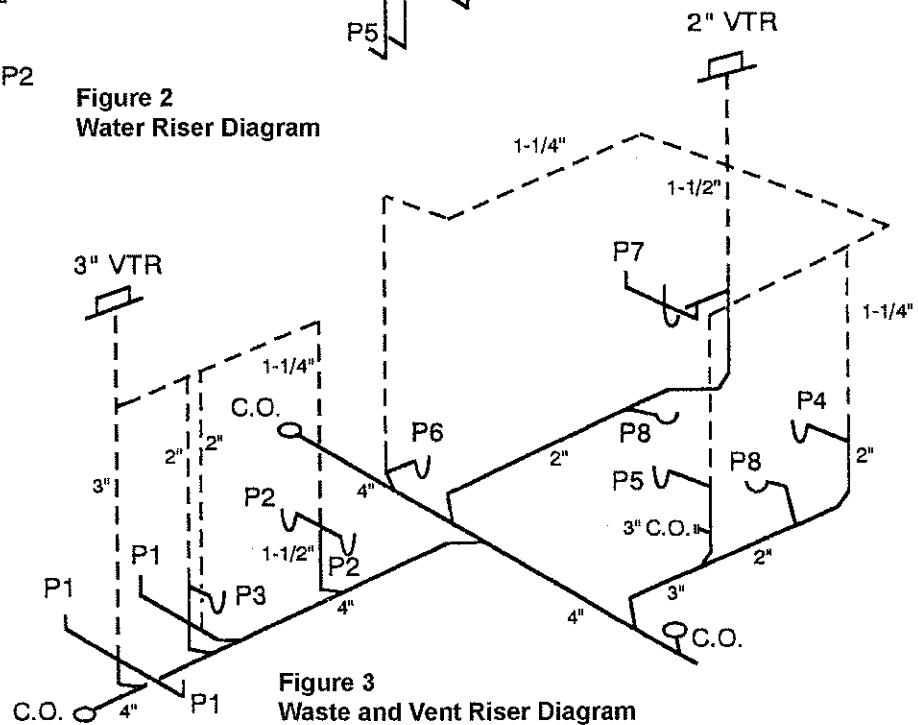


Figure 3
Waste and Vent Riser Diagram

SAMPLE DIAGRAMS