



**CITY OF DELANO**  
 Department of Building Inspections  
 234 2<sup>nd</sup> Street North, PO Box 108  
 Delano, MN 55328  
 Phone: 763 972-0550 -- Fax: 763 972-6174

**SEWER & WATER PERMIT**

**Permit Number:** \_\_\_\_\_  
**Date Issued:** \_\_\_\_\_  
**Receipt Number:** \_\_\_\_\_

**GOVERNMENT DATA PRACTICES ACT – TENNISON WARNING:**

The data you supply on this form will be used to process the permit you are applying for. You are not legally required to provide the data, but we will not be able to process the permit without it. The data will constitute a public record if and when the permit is granted.

Site Location: \_\_\_\_\_ Date: \_\_\_\_\_  
 Applicant Name: \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Engineer: \_\_\_\_\_ Registration No. \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Work Required in Right-of-Way:  Yes  No  
 Description of Work: \_\_\_\_\_

| <b>Computation of Fees:</b> | <b>\$ Amount</b> | <b>Quantity</b> | <b>Subtotal</b> |
|-----------------------------|------------------|-----------------|-----------------|
| SAC (Residential) Hookup    | \$ 50.00         | _____           | \$ _____        |
| * SAC (Commercial)          | \$ 75.00         | _____           | \$ _____        |
| ** WAC (Residential) Hookup | \$ 50.00         | _____           | \$ _____        |
| * WAC (Commercial)          | \$ 75.00         | _____           | \$ _____        |
| Sewer & Water Alt./Repair   | \$ _____         | _____           | \$ _____        |
| Trunk Charge – Sewer        | \$ _____         | _____           | \$ _____        |
| Trunk Charge – Water        | \$ _____         | _____           | \$ _____        |
| Sewer Connection Fee        | \$ _____         | _____           | \$ _____        |
| Water Connection Fee        | \$ _____         | _____           | \$ _____        |
| Right-of-Way                | \$ _____         | _____           | \$ _____        |
| Other                       | \$ _____         | _____           | \$ _____        |
| State Surcharge             | \$ .50           | _____           | \$ .50          |
| <b>TOTAL</b>                |                  |                 | <b>\$ _____</b> |

\* Paid for in Development Agreement:  Yes  No  
 \*\* Minimum **THHN 10 gauge wire to be wrapped around water line as a tracer.** From the bottom of the stop box cap to the water shut off valve.  
 \*\*\*The Stop Box for the water service to the building shall not be under the driveway for residential.  
 MSPC 4715.1800 Water Supply Valves; Subd. P. 2 Underground Stop Valves

I hereby apply for a sewer and/or water permit and acknowledge that the information above is complete and accurate; that the work will be done in accordance with the Ordinances of the City of Delano and with the Minnesota State Building Code; that I understand this is not a permit but an application for a permit and work is not to start without a permit; that the work will be in accordance with the approved plans, specifications and codes.

\_\_\_\_\_  
 Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

**Office Use:**

Required Inspections:       Underground               Final               Air/Hydro  
Approvals Required:       Engineering               Fire               Other \_\_\_\_\_  
Conditions of Issuance: \_\_\_\_\_

\_\_\_\_\_  
Approved By:

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