

City of Windsor Heights www.windsorheights.org

RESIDENTIAL TRADE PERMIT

Mechanical and Plumbing PERMIT NO.

Send to Safe Building Iowa at office@safebuildingiowa.com or call 515-333-4161

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Date of Applica	ıtion:	
Received by:		
Review Date:		

JOB AI	DDRESS
Street Number/Name	
Owner/Tenant Name	
APPL	ICANT
☐ Individual/Homeowner	☐ Contractor/Company
Name	
Address	
City/State/Zip	
Phone No.	
Contact Email Address	
State License No.	
SIGNATURE OF OWNER OR AGENT FOR OWNER	DATE:
Please describe the work you w	ill be doing:

ADDITIONAL ACKNOWLEDGMENTS:

- Except as provided by law, where any work has been started prior to obtaining this permit, the regular fee shall be doubled.
- This permit shall expire if work has not commenced or has been abandoned for 120 days. A new permit will be required at a fee of 1/2 the original permit fee.
- ALL WORK MUST BE INSPECTED. It is the responsibility of the permitee to call for inspections. No work shall be concealed or covered until approved by the inspector.
- The permitee acknowledges they are proficient in the performance of the work covered by the permit.
- Any questions as to code requirements or practices shall be resolved prior to initiation of the project.

PERMIT FEE SCHEDULE

MECHANICAL	No.	Fee
FLAT FEE	-	\$75.00
Furnace or Heater		-
Appliance Vent		-
Boiler		-
Air Conditioner		-
Ventilation Fan		-
Hood		-
Gas Piping (per outlet)		-
Fireplace or Solid Fuel Burning Appliance		-
TOTAL	-	
PLUMBING	No.	Fee
FLAT FEE	-	\$75.00
Street Excavation		-
Sewer Service Line and Water Line		-
Storm Sewer Service Line		-
Other		-
Gas Piping		-
Backflow Preventer		-

To schedule an inspection, please call 515-333-4161. A 24 hour notice is needed.

□ Payment Received	Date:	Amount: \$

WHEN APPROVED	BELOW THIS	BECOMES	YOUR :	PERMIT

ISSUED BY:	 DATE:

BUILDING OFFICIAL