



**DELANO MUNICIPAL UTILITIES**  
 11 BRIDGE AVENUE WEST P.O.BOX 65  
 DELANO, MN 55328  
 Phone: 763-972-0557 Fax: 763-973-0587  
**WATER/ELECTRIC PERMIT APPLICATION**  
 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: \_\_\_\_\_ License #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Architect/Engineer: \_\_\_\_\_ Registration#: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Permit Type Residential  Commercial  Domestic Service Size \_\_\_\_\_  
 Work Type: New  Replacement  Repair  Alteration  WAC Units \_\_\_\_\_  
 Written Discription: New construction - single family

<u>Qty</u>	<u>Computation of Fees:</u>	<u>Amount/Fee</u>	<u>Tax</u>	<u>Subtotal</u>
	5/8" Water Meter Fee	\$ 256.00		\$ _____
	1" Water Meter Fee	\$ 451.00		\$ _____
	Alternate Water Meter Fee:			
	Varies based on size of meter	\$ 0.00		\$ _____
	Water Connection Fee	\$ 2,304.00 x SAC Multiplier	0	\$ _____
	Additional Water Access Fee	\$ 3,257.00		\$ _____
	Water Trunk Fee	\$ 2,311.00 x SAC Multiplier	0	\$ _____
	Water Inspection Fee	\$ 170.00	Y	\$ _____
	Plan Review	\$ 28.00	Y	\$ _____

Sub Total \$ \_\_\_\_\_  
 Tax \$ \_\_\_\_\_  
**Total \$ \_\_\_\_\_**

\*Calculated at time of request

I hereby apply for a water/electric permit and I acknowledge that the information above is complete and accurate; that the work will be done in accordance with Delano Municipal Utilities, with the National Electrical Code 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: Rough-in  Final  Visual   
 Conditions of Issuance: \_\_\_\_\_

Permit Approved By \_\_\_\_\_ Date Approved \_\_\_\_\_