

City of Fort Dodge

Water Treatment Permit Application

Date: _____ Owner's Name: _____

Job Location: _____

Contractor: _____

FOR THE INSTALLATION, REPLACEMENT, OR REPAIR OF:

Equipment	Quantity	Per Unit Fee	Total
Water Softener		10.00	
RO Units		10.00	
Other Appliances or Equipment		10.00	
		PERMIT ISSUANCE FEE	\$10.00
		TOTAL PERMIT FEE	

Please return this permit application to:

City of Fort Dodge
 Plumbing Inspector
 819 1st Avenue South
 Fort Dodge, Iowa 50501
 515-573-4271
 Fax: 515-573-5097

Office Use
Permit # Issued:
Date: