



# City of **MENOMONIE**

**City of Menomonie**  
**Building Inspection/Zoning**  
800 Wilson Avenue  
Menomonie, WI 54751  
715-232-2221  
[www.menomonie-wi.gov](http://www.menomonie-wi.gov)

## **Plumbing Permit Application**

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

**Owner:** \_\_\_\_\_

**Project Address:** \_\_\_\_\_

**Description of proposed work:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Estimated Project Cost:** \_\_\_\_\_

**Plumbing Contractor:** \_\_\_\_\_

**Master Plumber WI License Number:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Mail check and application to:** **City of Menomonie Inspection Department**  
**800 Wilson Ave**  
**Menomonie, WI 54751**

**You may submit an application by email to [inspection@menomonie-wi.gov](mailto:inspection@menomonie-wi.gov) if preferred.**

Please submit the application with 1 full size printed copy of the state approved plumbing plans if applicable. (16 fixtures or more in commercial projects)

(All installations in health care facilities require state approval)