



City of **MENOMONIE**

City of Menomonie
Building Inspection/Zoning
800 Wilson Avenue
Menomonie, WI 54751
715-232-2221
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 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)