

PROJECT ADDRESS: Date:					
			State Lic. No.		
Address:		City/State/Zip:	State Lic. No		
☐ Commercial ☐ Residential Contractor E-mail Address:					
Buil	ding/Home Owner Name:		Phone:		
		D.		0 414	T. 4.1
	Water Service	Desci	ribe your project below	Quantity	Total
	Building Sewer	Note: Septic systems are permitte	ed and inspected by Polk County. 515-286-3705.		
	Storm Sewer				
PLUMBING	Secondary Water Meter				
	Water Heater				
	Fixtures				
	Stacks				
	Gas Piping Outlets				
			FLAT FEE ———>		\$ 75
ELECTRICAL	Electrical Panels				
	Meter Box				
	Circuits				
	Openings/Devices				
	Fixed Appliances				
	Standby Generator				
			FLAT FEE>		\$ 75
MECHANICAL	Furnace	Describe:			
	A/C or Refrig Units				
	Boiler				
	Water Heater				
	Hoods, Type I Type II				
	Fire Dampers				
	Gas Pipe Openings				
			FLAT FEE ———>		\$ 75
CONTRACTOR IS RESPONSIBLE FOR SCHEDUALING ALL INSPECTIONS, NOT THE HOME OWNER					
Questions concerning inspections and this application should be di-					
rec	ted to Veenstra & I (At least 24hr	Kimm at 515 850-2980 or email Jvan@v-k.net. s notice is required for scheduling inspections.)		Total Permit F	ee
X		Date:		:	
	Owner/Applicant		Approved By		