



**City of North Liberty  
 Dept. of Building Safety  
 319-626-5713**

<b>PERMIT APPLICATION TO INSTALL WATER TREATMENT DEVICE</b>		
<b>PERMIT FEE \$23.50</b>		
<b>ADDRESS LOCATION OF THE WATER TREATMENT UNIT</b>		
<b>APPLICANT'S INFORMATION</b>		
Name:		
Company Name:		
Current address:		
City:	State:	ZIP Code:
Phone:	Email:	
<b>PROPERTY OWNER'S INFORMATION</b>		
Name:		
Property Address:		
Phone:	E-mail:	
City:	State:	ZIP Code:
<b>INSTALLER'S INFORMATION</b>		
Company Name:		
Address:		Phone:
City:	State:	ZIP Code:
<p><b><i>State of Iowa Code states a person shall not operate as a contractor or install or repair plumbing, HVAC, refrigeration, or hydronic systems without obtaining a license issued by the State of Iowa Plumbing and Mechanical Systems Board</i></b></p>		
<b>MINIMUM 1" AIR GAP REQUIRED BETWEEN THE DISCHARGE PIPE AND DRAIN OPENING</b>		
<b>APPLICANT ACKNOWLEDGMENT</b>		
<p>I hereby apply for a permit and I acknowledge that the information provided here in is completed and accurate; that the work will be in conformance with the federal, state and local applicable codes; that I understand this is not the permit but only an application for a permit and work is not to start without a permit; I understand the city must perform inspection when all work is completed.</p>		
Name:		Date: