



# City of Zimmerman

12980 Fremont Avenue  
Zimmerman, MN 55398

Telephone 763-856-4666 \* Fax 763-856-4787  
www.zimmerman.govoffice.com

## License/Registration Application for Sewer & Water Installer

COMPANY NAME

NAME OF BUSINESS OWNER

ADDRESS

EMAIL

CITY

STATE

ZIP CODE

TELEPHONE

FEDERAL TAX ID# or MN BUSINESS ID#

Required on all license applications by MN Statute 270.72, Sub. 4

TO THE HONORABLE CITY COUNCIL:

Representing the above business, I herewith submit application for license/registration to perform sewer and water installation within the City of Zimmerman, in accordance with the ordinances of said city.

Submitted herewith are the following:

1. Completed application with application fee of \$60.00
  - \$60.00 if the installer is a licensed plumber
  - No charge if the installer has completed pipe laying training and filed a bond with the Department of Labor & Industry, application will result in a registration by the City of Zimmerman to do the installation of sewer and water.
  - No charge if the installer has a SSTS License with the Minnesota Pollution Control Agency.
2. Certificate of Insurance evidencing the holding of Public Liability Insurance in the limits of:
  - \$100,000 per person
  - \$300,000 per accident for bodily injury
  - \$100,000 for property damage
4. Licensed plumbers or contractors will provide evidence of the mandatory, statewide code compliance bond in the amount of \$25,000 filed with the State of Minnesota.
5. All licenses are written for a calendar year or balance thereof ending December 31, regardless of application date. Application will be reviewed and approved by the City Council at the meeting following completed application, on a first or third Monday of the Month. License/Registration Certificate will be mailed to the Installer's office address. If inspections are needed before the license application is approved, it will be at the discretion of the maintenance staff.

SIGNATURE OF APPLICANT

DATE (month, day, year)

*For office use only:*

Date Received: \_\_\_\_\_ Received by: \_\_\_\_\_ PAID: cash \_\_\_ check # \_\_\_\_\_

Receipt #: \_\_\_\_\_

Council Approval Date: \_\_\_\_\_ Council Signature \_\_\_\_\_