



Plumbing Permit Application

Job Address: _____

Date of Application: _____

Property Owner Information

Name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email address: _____

Owner signature (Required):

Contractor Information

Business name: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email address: _____

Contractor signature (Required):

Is Contractor licensed? Yes No

Type of Work

New construction Add./alt./replacement
 Demolition Other: _____

Category of Construction

1 & 2 Family dwelling Multifamily
 Accessory building
 Commercial/Industrial Other: _____

Description of Work

(example: upstairs bath remodel)

Total Project Cost: _____

City of McCook
Building & Zoning Department
505 West C Street * PO Box 1059
McCook, NE 69001
(308) 345-2022 * Fax (308) 345-1461
bldginsp@cityofmccook.com
www.cityofmccook.com

Fee Schedule - Use Checklist	
\$25.00 Min. plus \$3.00 per item over 6 items	
All items listed shall connect to sanitary sewer only, unless approved in writing.	
Description	Qty.
Water closet (Toilet)	
Bathtub	
Lavatory (Wash basin)	
Shower	
Kitchen sink & disposal	
Dishwasher	
Laundry tray	
Clothes washer	
Urinal	
Drinking fountain	
Floor-sink / slop sink	
Floor drain	
Roof drain	
Water softener	
Water heater	
Waste interceptor	
Water piping & treating equipment	
Vents	
Cleanouts	
Emergency eye wash	
Trench drains	
Sand & oil interceptor / grease trap	
Repair Water Service Line	
Replace Water Service Line	
Repair Sewer Service Line	
Replace Sewer Service Line	
TOTAL QTY.	

Building Inspector

Public Works Director

Utility Director

