SOUTH DAKOTA DEPARTMENT OF LABOR AND REGULATION

SOUTH DAKOTA STATE PLUMBING COMMISSION

217 West Missouri Avenue, Pierre, SD 57501
Tel: 605.773.3429 Fax: 605.773.5405 dlr.sd.gov/plumbing

HOMEOWNER PLUMBING INSTALLATION CERTIFICATE REQUEST FORM

Instructions:

- Form will open in Adobe Acrobat to complete, print, sign, and mail. Changes made in your internet browser will not save. You can also print the form, print legibly, and mail to the address above.
- A separate completed application must be submitted for each residential dwelling.
- A fee of $75 (check or money order) must accompany each application.
  - (Permit Cost: $5, Inspection Fee Cost: $70)
- All fees are non-refundable.
- Upon receipt of this form, the Plumbing Commission will send a copy of the installation certificate to you along with a Homeowner Packet which will give you instructions on Inspection Requirements.

Name of Owner**:** _____

Mailing Address: _____ _____ _____ _____
Street City State Zip code

Email Address: _____ Cell Phone: _____

Home Phone:_____Work Phone: _____

Project Information (Including Directions):

Address: _____

City: _____ County: _____

Directions:

Description of plumbing project:

1. Are you the owner of the property or farmstead where this plumbing installation is being done? ☐Yes ☐No
2. A. **Current Residence:** ☐Yes ☐No B. **New Construction I intend to occupy as my residence:** ☐Yes ☐No
3. A. **Primary dwelling:** _____ B. **Secondary dwelling:** _____
4. Are you personally installing the plumbing and fixtures? ☐Yes ☐No
5. Rent: A. **Collecting Rent:** ☐Yes ☐No B. **Previously collected rent:** ☐Yes ☐No C. **Intend to collect rent:** ☐Yes ☐No

Acknowledgment: I declare and affirm under the penalties of perjury that this claim (petition, application, information) has been examined by me, and to the best of my knowledge and belief, is in all things true and correct. I understand that I must personally perform the plumbing installation in compliance with SDCL 36-25-17 and may not allow my plumbing permit to be used by any other person. If it is determined I have not done the work myself, my installation certificate will be voided. I promise to abide by all the laws and rules of the State of South Dakota governing these practices.

Signature of Owner: _____ Date: _____

For office use only: **PERMIT NUMBER:** _____