

PLUMBING PERMIT APPLICATION

LICENSE # _____ PERMIT # _____ DATE: _____
LOCATION: _____
OWNER: _____
KIND OF BUILDING: _____ USED AS: _____
TO BE COMPLETED ABOUT: _____ ESTIMATED COST: \$ _____
OLD – NEW BUILDING NUMBER: _____

TYPE	NUMBER	FEE
STACKS	_____	_____
SINKS	_____	_____
BATHS	_____	_____
WATER CLOSET	_____	_____
LAVATORY	_____	_____
TANK AND HEATER	_____	_____
LAUNDRY TRAY	_____	_____
WATER DISTRIBUTION SYSTEMS	_____	_____
FLOOR DRAINS	_____	_____
SEWAGE EJECTOR	_____	_____
FOUNTAIN (DRINKING)	_____	_____
SUMP	_____	_____
SHOWERS	_____	_____
URINAL	_____	_____
CATCH BASIN	_____	_____
DISHWASHING MACHINE	_____	_____
HUMIDIFIER	_____	_____
GARBAGE GRINDER	_____	_____
WASHING MACHINE	_____	_____
SPECIAL WASTES	_____	_____
RAINWATER LEADERS	_____	_____
MISCELLANEOUS FIXTURES	_____	_____
		TOTAL FEE: _____

CONTRACTOR'S NAME & ADDRESS: _____

READY FOR INSPECTION ON _____ OR WILL CONTACT PERMIT CLERCK LATER _____

Applicant certifies that all information given is correct and that all pertinent city ordinances will be complied with in performing the work for which this permit is issued.

Signature of Contractor

Signature of Permit Clerk