PLUMBING PERMIT APPLICATION

Jurisdiction of _____

Applicant to complete numbered spaces only.

JOB ADDRESS					OWNER	JOB ADDRESS
1	LEGAL DESCR.	LOT NO.	BLOCK	TRACT (SEE ATTACHED SHEET)		
2	OWNER		MAIL ADDRESS	ZIP / PHONE		
3	CONTRACTOR		MAIL ADDRESS	PHONE / LICENSE NO.		
4	ARCHITECT OR DESIGNER		MAIL ADDRESS	PHONE / LICENSE NO.		
5	ENGINEER		MAIL ADDRESS	PHONE / LICENSE NO.		
6	LENDER		MAIL ADDRESS	BRANCH		
7	USE OF BUILDING					
8	CLASS OF WORK NEW ADDITION REPAIR MOVE REMOVE					
9	DESCRIBE WORK					

SPECIAL CONDITIONS:

_____

_____

_____

_____

APPLICATION ACCEPTED BY	PLANS CHECKED BY	APPROVED FOR ISSUANCE BY

NOTICE

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER WORK IS COMMENCED.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

_____

Signature of Contractor or Authorized Agent (Date)

_____

Signature of Owner (If Owner Builder) (Date)

No.	Type of Fixture or Item	Fee	
	WATER CLOSET (TOILET)	$	
	BATHTUB		
	LAVATORY (WASH BASIN)		
	SHOWER		
	KITCHEN SINK & DISPOSAL		
	DISHWASHER		
	LAUNDRY TRAY		
	CLOTHES WASHER		
	URINAL		
	DRINKING FOUNTAIN		
	FLOOR—SINK OR DRAIN		
	SLOP SINK		
	SEWER		
	CESSPOOL		
	SEPTIC TANK AND PIT		
	WATER HEATER		
	WASTE INTERCEPTOR		
	WATER PIPING & TREATING EQUIPMENT		
	LAWN SPRINKLER SYSTEM		
	VACUUM BREAKERS		
	GAS SYSTEMS: NUMBER OF OUTLETS		
	PERMIT	$	
	TOTAL FEE	$	

WHEN PROPERLY VALIDATED (IN THIS SPACE), THIS IS YOUR PERMIT

PLAN CHECK VALIDATION CK MO. CASH CC PERMIT VALIDATION CK MO. CASH CC

INSPECTOR

INSPECTION REPORTS			
DATE	ITEM	REMARKS	INSPECTOR

USE SPACE BELOW FOR NOTES, FOLLOW-UP, ETC.

(REVERSE SIDE OF PLUMBING PERMIT APPLICATION)