

# Plumbing Permit Application Form

## General Information

Name of Applicant: \_\_\_\_\_ Phone# \_\_\_\_\_

Address of Applicant: \_\_\_\_\_ Email \_\_\_\_\_

Property Owner: \_\_\_\_\_

Property Owner Address: \_\_\_\_\_

Contractor: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Enter the Number of Fixtures listed below:

***\*Issue Fee will apply once the application form is submitted.***

Cost of Job \$ \_\_\_\_\_

Fixtures	Number of Fixtures
Water Closet	_____
Sinks	_____
Bath Tubs	_____
Lavatories	_____
Laundry Tubs	_____
Urinals	_____
Drinking Fountain	_____
Floor Drain	_____
Grease Trap	_____
Washing Machine	_____
Hot Water Heater	_____
Shower Bath	_____
Dishwasher	_____
Garbage Disposal	_____
Boiler Gas	_____
House Sewer	_____
House Sewer Replacement	_____
Sewer Lateral	_____
Ice Maker	_____
Misc.	_____

**Total Number of Fixtures:** \_\_\_\_\_