



**PLUMBING
PERMIT APPLICATION**

PLEASE PRINT OR TYPE

Contractor

Owner & Occupant

JOB ADDRESS: _____ Date: _____

OWNER: _____ Phone # _____

Mailing Address _____ City _____ State ____ Zip _____

Licensed Plumbing Contractor

Name _____ Phone # _____ Fax # _____

Mailing Address _____ City _____ State ____ Zip _____

Structure Type/Fee:

New 1 or 2 Family Dwelling \$25.00

All Others \$25.00

New Commercial and Multifamily \$50.00

All Others \$40.00

Permit Fees for garages and out buildings shall be the same as the "all others" fee for the category that it falls under.

Estimated Completion Date: _____

Describe Work:

Gas Line

Interior Waste Lines

Water Line

Water Heater: Gas Gallons _____

Note: All work must be inspected and approved before being covered up and a final inspection will be done when the job is completed. It is the permit holder's responsibility to call for all inspections. All plumbing work shall comply with the International Plumbing Code.

Applicant

Inspected & Approved

Date