

PLUMBING PERMIT

Town of Stevensville
PO Box 30
Stevensville, MT 59870
406 777-5271

PERMIT # _____

Date _____ Project address _____
 Type of project: Res. Commercial Multi-family Other _____
 Describe work to be done: _____
 Public water supply Public sewer Private well Private septic Other _____
 Work to be done by Homeowner/occupant Licensed plumber (Mt plumbing lic # _____) Other _____
 Property owner name _____ Address _____ Phone _____
 Plumber Name _____ MT Lic # _____ Address _____ Phone _____

NOTICE

A HOMEOWNER MAY SECURE THE PERMIT FOR AND PLUMB ONLY THEIR OWN RESIDENTIAL BUILDING OCCUPIED AND USED FOR THEIR OWN PERSONAL USE. A MONTANA LICENSED PLUMBER IS REQUIRED ON ALL RENTALS, COMMERCIAL BUSINESSES, ETC.

PERMIT FEES

Enter how many of each fixture to be installed, add total number of fixtures and enter total as indicated:

		<u>OTHER</u>
Area drain _____	Indirect waste _____	Each permit fee..... \$ <u>25.00</u>
Backflow preventer _____	Kit sink (domestic) _____	Water piping repair, replace or alter \$10.00..... \$ _____
Bar sink _____	Kit sink (comm) _____	Drain repair, replace or alteration, \$10.00..... \$ _____
Bidet _____	Lavatory _____	Vent piping repair, replace or alteration \$10.00.. \$ _____
Car wash sump _____	Lawn/fire sprklr _____	Fixture or trap repair, replace or alter \$10.00..... \$ _____
Clothes washer _____	Roof drains _____	Fuel gas piping, 1-4 outlets \$10.00..... \$ _____
Coffee maker _____	Service/utility sink _____	“ “ “ 5 or more outlets add \$6.00..... \$ _____
Dishwasher _____	Shower _____	Water heater replace/repair \$10.00 each..... \$ _____
Drinking fountain _____	Sump drain _____	Med gas/vacuum piping, 1-5 outlets \$110.00..... \$ _____
Dental chair _____	Traps _____	“ “ “ “ \$10.00 ea additional outlet.. \$ _____
Floor drain _____	Urinal _____	Water service \$10.00..... \$ _____
Floor sink _____	Water closet _____	SUB-TOTAL..... \$ _____
Grease trap _____	Water heater _____	
Ice maker _____	Wash tray _____	
TOTAL NUMBER OF FIXTURES FROM LIST ABOVE _____ multiply x \$9 =		SUB-TOTAL..... \$ _____
		TOTAL FEES DUE PRIOR TO ISSUANCE OF PERMIT \$ _____

Fees paid by: Cash Check (# _____) Credit card Other _____

NOTICE

THIS PERMIT BECOMES NULL AND VOID IF WORK IS NOT COMMENCED WITHIN 180 DAYS FROM DATE OF ISSUANCE OR IF WORK IS SUPENDED OR ABANDONED FOR 180 DAYS AFTER THE WORK HAS COMMENCED. AN EXTENSION OF THE PERMIT MAY BE GRANTED BY THE BUILDING OFFICIAL AFTER REVIEWING A WRITTEN REQUEST FOR EXTENSION THAT SHOWS VALID REASON(S) WHY THE WORK HAS NOT BEEN COMPLETED WITHIN THE INITIAL 180 DAY PERIOD FROM DATE OF ORIGINAL ISSUANCE.

PLEASE POST YOUR PERMIT COPY SO THAT IT IS VISIBLE FROM THE STREET

Print name _____ Signature _____ Date _____

Permit issued by _____ Date _____ Applicable codes _____

Permit final by _____ Date _____ Comments _____