

[ ] Licensed Plumbing Contractor [ ] Exempt Applicant



Date Received Control #

Date Issued Permit #

<b>I. IDENTIFICATION—APPLICANT:</b> COMPLETE ALL APPLICABLE INFORMATION. WHEN CHAN	1GING
CONTRACTORS NOTIFY THIS OFFICE CALL UTILITY DIG NO: 1-800-272-1000	

Block Lot Work Site Location					DESCR	RIPTION OF WOR	К	
Owner in Fee:								
Tel. ( ) e-mail			QTY.	FIXTURE/EQUIPMENT Water Closet Urinal/Bidet Bath Tub		FEE (Office Use O		
Contractor License No  Home Improvement Contractor Registration Note The Provided Head of the Present Test Test Test Test Test Test Test Tes	No. or Exemption Reas	Exp. Date con (if applicable):_ FAX: (	_ )			Lavatory Shower Floor Drain Sink Dishwasher Drinking Fount Washing Mach		
Building Sewer Size Pul Water Service Size Pul Est. Cost of Plumbing Work \$	olic Sewer olic Water	Private Sep	tic			Hose Bibb Water Heater Fuel Oil Piping		
JOB SUMMARY (Office Use Only) PLAN REVIEW [ ] No Plans Required [ ] Partial -Underslab Utilities Approved Date: Approved by: [ ] Plumbing Plans Approved Date: Approved by: Joint Plan Review Required: [ ] Bldg. [ ] Elec. [ ] Fire. [ ] Elev. SUBCODE APPROVAL for PERMIT	INSPECTIONS Type: Slab Rough Water Sewer Fixtures Gas Equipment Gas Piping		Month/Day) Approval	Initial		Gas Piping LPGas Tank Steam Boiler Hot Water Boile Sewer Pump Interceptor/Sep Backflow Preve Greasetrap Sewer Connec Water Service	parator enter tion Connection	
Date:Approved by:	LPGas Tank Fuel Oil Piping Solar TCO Final					Other	Administrative Surcharge	. \$
Approved by:  C. CERTIFICATION IN LIEU OF OATH  I hereby certify that I am the (agent of) owne perform the work listed on this application.	r of record and am auti						State Permit Surcharge Fee	9 \$ 2 \$ E \$

Applicant's Signature/Contractor's Seal and Signature

D. TECHNICAL SITE DATA