



# Plumbing Permit Application

Permit No. \_\_\_\_\_

| Official Use Only |                                |
|-------------------|--------------------------------|
| Cash              | <input type="checkbox"/> _____ |
| Check             | <input type="checkbox"/> _____ |
| Credit Card       | <input type="checkbox"/> _____ |
| Prepaid           | <input type="checkbox"/> _____ |
| Received          | _____                          |
| Receipt No        | _____                          |
| Date:             | _____                          |

|   |  |
|---|--|
| Contractors Name _____  |  |
| Company Name _____  |  |
| Mailing Address _____   |  |
| City _____  | State _____ Zip _____  |
| Office Phone Number _____   | Fax Number _____ Cell Number _____   |
| Email Address _____   |  |
| <b>Project Information:</b>   | <b>Valuation of Project:</b>   |
| Project Address _____   |  |
| Property Owner / Tenant / Builder _____   | Phone Number _____   |
| <b>Permit Type: Check ALL that apply (Minimum fee \$35.00)</b>  |  |
| <input type="checkbox"/> Water Service Line            Per Line            _____ X            \$24.00            _____<br><input type="checkbox"/> Sewer Service Line            Per Line            _____ X            \$24.00            _____<br><input type="checkbox"/> Gas Service Line            Per Line            _____ X            \$24.00            _____<br><input type="checkbox"/> Gas Pressure Test            _____            _____            \$ 6.00            _____<br><input type="checkbox"/> Water Heater            Per Tank            _____ X            \$24.00            _____<br><input type="checkbox"/> Grease / Sand Trap            Per Trap            _____ X            \$48.00            _____<br><input type="checkbox"/> Backflow Preventer            Per Backflow            _____ X            \$ 6.00            _____<br><input type="checkbox"/> Minimum Fee            _____            _____            \$30.00            _____<br><input type="checkbox"/> Mobile Home Connection            _____            _____            \$30.00            _____<br><input type="checkbox"/> Other _____            _____            _____            \$30.00            _____<br><input checked="" type="checkbox"/> State Uniform Building Code Fee            _____            _____            \$ 5.00            \$5.00 | _____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____ |
| FEES MAY APPLY DURING CONSTRUCTION  |  |
| <input type="checkbox"/> Work performed prior to <b>ISSUED</b> permit <input type="checkbox"/> Double above fees<br><input checked="" type="checkbox"/> Failure to apply for permit            \$120.00<br><input type="checkbox"/> No Valid City License            \$120.00<br><input type="checkbox"/> No Valid State License            \$120.00<br><input type="checkbox"/> State License Number not displayed on vehicle (per vehicle)            \$120.00<br><input type="checkbox"/> Partial Inspection (per insp) R/C            \$30.00/ \$60.00<br><input type="checkbox"/> Re-Inspection (first time) R/C            \$30.00/\$60.00<br><input type="checkbox"/> Re-Inspection (each additional) R/C            \$60.00/ \$120.00<br><input type="checkbox"/> After Hours Inspection (per inspection) R/C            \$60.00/ \$120.00  | _____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____<br>_____                   |
| <b>Contractor's Signature:</b> _____ <b>Date:</b> _____<br>(NOTE: fees must be paid in full prior to beginning work—Ord. 5-308)   |  |