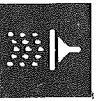


# PLUMBING SUBCODE TECHNICAL SECTION



Date Received \_\_\_\_\_  
Date Issued \_\_\_\_\_  
Control # \_\_\_\_\_  
Permit # \_\_\_\_\_

**A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE.**

Block \_\_\_\_\_ Lot \_\_\_\_\_  
Work Site Location \_\_\_\_\_

Owner In Fee \_\_\_\_\_  
Address \_\_\_\_\_

Tele. ( \_\_\_\_\_ ) \_\_\_\_\_  
Contractor \_\_\_\_\_  
Address \_\_\_\_\_

Tele. ( \_\_\_\_\_ ) \_\_\_\_\_ Fax ( \_\_\_\_\_ ) \_\_\_\_\_  
Lic. No. \_\_\_\_\_  
Federal Emp. No. \_\_\_\_\_

**B. PLUMBING CHARACTERISTICS**

Use Group Present \_\_\_\_\_ Proposed \_\_\_\_\_  
Building Sewer Size \_\_\_\_\_ Public Sewer \_\_\_\_\_ Private Septic \_\_\_\_\_  
Water Service Size \_\_\_\_\_ Public Water \_\_\_\_\_ Private Well \_\_\_\_\_  
Est. Cost of Plumbing Work \$ \_\_\_\_\_

**JOB SUMMARY (Office Use Only)**

PLAN REVIEW	INSPECTIONS	Failure	Failure	Approval	Initial
<input type="checkbox"/> No Plans Required <input type="checkbox"/> Joint Plan Review Required: <input type="checkbox"/> Building <input type="checkbox"/> Electric <input type="checkbox"/> Fire <input type="checkbox"/> Elevator <input type="checkbox"/> Plumbing Plans Approved Date: _____ Approved by: _____	Type: _____ Slab _____ Rough _____ Water _____ Sewer _____ Fixtures _____ Gas Equipment _____ Gas Piping _____ Solar _____ TCO _____	_____	_____	_____	_____

**C. CERTIFICATION IN LIEU OF OATH**

I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Signature — Contractor's Seal \_\_\_\_\_

Licensed Plumbing Contractor  Exempt Applicant

**D. TECHNICAL SITE DATA (List of all fixtures.)**

NO. FUTURE/EQUIPMENT	FEE (Office Use Only)
Water Closet	\$ _____
Urinal/Bidet	_____
Bath Tub	_____
Lavatory	_____
Shower	_____
Floor Drain	_____
Sink	_____
Dishwasher	_____
Drinking Fountain	_____
Washing Machine	_____
Hose Bibb	_____
Water Heater	_____
Fuel Oil Piping	_____
Gas Piping	_____
Steam Boiler	_____
Hot Water Boiler	_____
Sewer Pump	_____
Interceptor/Separator	_____
Backflow Preventer	_____
Greasetrapp	_____
Sewer Connection	_____
Water Service Connection	_____
Stacks	_____
Other _____	_____
Other _____	_____
Other _____	_____

Administrative Surcharge	\$ _____
Minimum Fee	\$ _____
Fee	\$ _____
<b>TOTAL FEE</b>	<b>\$ _____</b>