



PLUMBING SUBCODE TECHNICAL SECTION



A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block/Lot/Qual:
Work Site Location:

Owner in Fee:
Tel. _____

email: _____

Contractor: _____

email: _____

Tel. _____

Contractor License No.:

Exp Date: _____

Home Improvement Contractor Reg. No. or Exemption Reason (if applicable):

Federal Emp. ID No. _____

FAX: _____

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

☐ 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

Date: _____

Approved by: _____

SUBCODE APPROVAL for CERTIFICATE

☐ CO ☐ CCO ☐ CA

Date: _____

Approved by: _____

INSPECTIONS

Type:

Slab

Rough

Water

Sewer

Fixtures

Gas Equipment

Gas Piping

LPGas Tank

Fuel Oil Piping

Solar

TCO

Final

Dates (Month/Day)

Failure

Failure

Approval

Initial

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.

Applicant sign/Contractor

sign and seal here: _____

Print name here: _____

☐ Licensed Plumbing Contractor ☐ Exempt Applicant

Permit #:

Issue Date:

Application Id:

Application Date:

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

QTY.

FIXTURE/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

LPGas Tank

Steam Boiler

Hot Water Boiler

Sewer Pump

Interceptor/Separator

Backflow Preventer

Greasetrap

Sewer Connection

Water Service Connection

Stacks

Other

Other

Other

Other

Other

Other

Other

Other

Other

Administrative Surcharge

\$ _____

Minimum Fee

\$ _____

State Permit Surcharge Fee

\$ _____

TOTAL FEE

\$ _____