

PLUMBING PERMIT APPLICATION

TOWNSHIP: _____

Date of Application: _____, 20____

Permit Fee: \$ _____

Name of Applicant (Owner): _____

Address _____ Phone _____

_____ Zip Code _____

Name of Contractor: _____

Address _____ Phone _____

_____ Zip Code _____

Subdivision Name and Lot No. (if applicable): _____

Tax Map Parcel Number: _____

- Check Appropriate Box:
- Mobile Home or Manufactured Dwelling
 - Single-Family Dwelling
 - Two Family Dwelling
 - Apartment Building or Condominium
 - Addition or Alteration
 - Sewer Lateral
 - Water Lateral
 - Non-Residential Application: Specify: _____
 - Permit for work not listed elsewhere

Statement of materials to be Used: _____

I hereby certify that the information hereon and herewith is true and correct to the best of my knowledge.

Applicant's Signature: _____ Date: _____

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Permit No. _____ Issuance Date: _____

Approved by Inspector: _____ Date: _____

Signature