PLUMBING APPLICATION

Owner Or Plantation

Street

Last

Owner-Applicant's Statement

Caution: Inspection Required

Date

Type Of Structure To Be Served:

- [ ] SINGLE FAMILY DWELLING
- [ ] MODULAR OR MOBILE HOME
- [ ] MULTIPLE FAMILY DWELLING
- [ ] OTHER (SPECIFY) _____

Plumbing To Be Installed By:

- [x] MASTER PLUMBER
- [ ] OIL BURNERMAN
- [ ] MFG'D. HOUSING DEALER/MECHANIC
- [ ] PUBLIC UTILITY EMPLOYEE
- [ ] PROPERTY OWNER
- [ ] LICENSE #

Hook Up & Piping Relocation Maximum of 5 Hook-Up

HOOK UP to public sewer in Five Points where [illegible] the local Sanitary District

HOOK UP to an on-site subsurface wastewater disposal system

Number	Column 2 Type of Fixture
	Hospital Sink
	Urinal
	Drinking Fountain
	Industrial Waste

Number	Type of Fixture
	Bathtub (and Shower)
	Shower (separate)
	Sink
	Wash Basin
	Water Closet (Toilet)
	Clothes Washer
	Dish Washer
	Garbage Disposal
	Water Heater

SEE FEE SCHEDULE FOR CALCULATING FEE

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