PLUMBING APPLICATION		551 - 5 T	- 7·	Department of Human Sciences Division of Health Engineering
PROPERTY ADDRESS  Town or Plantation  Street Subdivision Lot #  PROPERTY OWNERS NAME  PROPERTY OWNERS NAME  Last: First:  Applicant Name:  Mailing Address of Owner/Applicant (If Different)  Owner/Applicant Statement  I certify that the information submitted is correct to the knowledge and understand that any falsification is rease.  Plumbing Inspectors to them a Permit.  Signature of Owner/Applicant				
This Application is for	THE VOICE AND REAL PROPERTY.	INFORMATION	DI.	abian Ta Da Installad Day
1. NEW PLUMBING 1. SINGLE	DBILE HOME	Plumbing To Be Installed By:  1. MASTER PLUMBER  2. OIL BURNERMAN  3. MFG'D. HOUSING DEALER/MECHANIC  4. PUBLIC UTILITY EMPLOYEE  5. PROPERTY OWNER  LICENSE #		
Hook-Up & Piping Relocation  Maximum of 1 Hook-Up Number		Column 2 Type of Fixture	Number	Column 1 Type of Fixture
HOOK-UP: to public sewer in those cases where the connection is not regulated and inspected by the local Sanitary District.	Flo	sebibb / Sillcock or Drain	2	Bathtub (and Shower) Shower (Separate)
wastewater disposal system.		nal 		Sink Wash Basin
		irect Waste	7	Water Closet (Toilet)
PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.	Wat	Water Treatment Softener, Filter, etc.		Clothes Washer
٠	Gre	ease / Oil Separator	1	Dish Washer
	Der	ntal Cuspidor	1	Garbage Disposal
OR	Bid	Bidet		Laundry Tub
	Other:			Water Heater
TRANSFER FEE [\$6.00]		Fixtures (Subtotal) Column 2		Fixtures (Subtotal) Column 1
	<b>Y</b>		2	Fixtures (Subtotal) Column 2
SEE PERMIT FEE SCHEDULE FOR CALCULATING FEE			13	Total Fixtures
L	ALUULAIIIG			Fixture Fee
				Transfer Fee
Page 1 of 1				Hook-Up & Relocation Fee Permit Fee (Total)

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