



# Part 3 Building Plumbing Permit Application

<b>Applicant:</b> _____	<b>Property Owner:</b> _____	<b>Contractor:</b> _____
<b>Mailing Address:</b> _____ _____	<b>Mailing Address:</b> _____ _____	<b>Mailing Address:</b> _____ _____
<b>Phone:</b> _____	<b>Phone:</b> _____	<b>Phone:</b> _____
<b>Email:</b> _____	<b>Email:</b> _____	<b>Email:</b> _____

<b>Location:</b> <i>(Civic Address OR Legal Description)</i> _____	<b>Jurisdiction:</b> _____
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<b>Building Name:</b> _____	<b>Building Size:</b> _____
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<b>Class of Work:</b>	New	Repair	Alteration
	Addition	Renovation	Other: _____

<b>Major Occupancy:</b> _____	<b>Building Permit No.:</b> _____
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<b>No. of Dwelling Units:</b> _____	<b>No. of Other Units:</b> _____	<b>No. of Storeys:</b> _____
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**NUMBER AND LOCATION OF FIXTURES (TRAPS)**

FLOOR		WATER CLOSETS	BATH TUBS	BASINS	KITCHEN SINKS	LAUNDRY TUBS	AUTO WASHERS	SHOWERS	URINALS	OTHER				FLOOR DRAINS	ROOF TERMINALS	FEES \$15/UNIT
Basement	FIXTURES															
1st	FIXTURES															
2nd	FIXTURES															
3rd	FIXTURES															
4th	FIXTURES															
<b>TOTAL</b>																

*For additional storeys please itemize on a separate sheet*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**WHEN VALIDATED THIS IS YOUR PERMIT (Official Use Only)**

<b>Validated By:</b> _____	<b>Plumbing Permit No.:</b> _____
Date: _____	