EH@DelawareHealth.org | (740) 368-1700

Permit #		
Receipt #	 /_	_/

PLUMBING PERMIT Residential

Job site located at:				
Street:	City: _	Zip:	Township:	
Subdivision: Lot #: _		_ Model Name:	[]	lew []Remodel
Plumbing Contractor Contractor:		Description		Number of Fixtures
		Air Admittance Valve		
Street:		Lavatory (Bath Sink)		
City/State/Zip:		Water Closet (Toilet)		
Phone:		Bathtub		
Registration #:		Shower		
Property Owner Information		Kitchen Sink		
Name:		Dish Washer		
		Garbage Disposal		
Street:		Washing Machine		
City/State/Zip:		Laundry Sink		
Phone:		Floor Drain/Hub Drain		
Hadarana d Irana atian		Water Heater		
Underground Inspection: Approved //		Backflow Device		
Approved		Sump Pump/Ejector Pump		
		Bidet		
Top Out Inspection:		Other		
Approved//		Total Fixtures		
Disapproved//		Per Fixture Fee		X \$18.00
eta al la anacationa		Application Fee		\$100.00 includes first fixture
Final Inspection: Approved //		Water Heater Replacement Water heater replacement for City of Delaware and City of Powell only	e	+ \$60.00
Disapproved//		Grand Total		
I hereby certify that all work will be done	e in accorda	nce with the State and Local r	egulation.	
Applicant's Signature Date		Issued By		Date
Comments:				

PERMIT MUST BE POSTED ON SITE

NO PART OF ANY PLUMBING SHALL BE COVERED UNTIL IT HAS BEEN INSPECTED, TESTED, AND APPROVED.

Call for final inspection when job is complete and before occupancy. Plumbing inspections are schedule for next business day.

RESIDENTITAL INSPECTION FEES: There will be a \$125.00 charge for each partial inspection and \$150.00 charge for each failed inspection. A partial inspection is any underground, rough, or final inspection that involves a portion or portions of the full plumbing system.

ALL FEES MUST BE PAID PRIOR TO SCHEDULING THE FINAL INSPECTION