PLUMBING PERMIT APPLICATION
Chester Heights Borough

Date: _____

TO THE PLUMBING INSPECTOR:

The following abstract of specifications of Plumbing and Drainage, with description and accompanying plan, are submitted for approval:

_____
Signature of Owner

Address of Job _____

_____

No. of stories high _____ Type of building _____
Owner _____ Address _____
Architect _____ Address _____
Plumber _____ Address _____
Register No. _____ Address _____

DESCRIPTION OF PLAN AND ABSTRACT OR SPECIFICATIONS

All work, materials and construction to be in accordance with the Rules and Regulations of the _____ Borough PLUMBING CODE and to comply therewith in all particulars.
Is connection to be made with sewer ? ( ) Yes ( ) No What size main trap _____
Size of main house drain _____
Size of soil pipe _____
What is the grade from the main drain ? _____ Min. ventilation of toilet compartment _____ sq.ft.

FIXTURES IN BUILDING

OLD FIXTURES IN BUILDING – RED INK
NEW FIXTURES IN BUILDING – BLACK INK

FLOORS	Yard	Basem't	1st	2nd	3rd	4th	5th	6th				TOTAL
Water closets												
Bath tubs												
Shower baths												
Basins												
Sinks												
Laundry tubs												
Slop hoppers												
Urinals												
Garbage grinders												
Outlets												
Dryers												
Washing machines												
Dishwasher												
Sewer connection												
Water service												
Hot water heater												
Water distribution												
TOTAL												

Fee $ _____ APPROVED: _____

Permit # _____