

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	1 st	2 nd	3 rd	4 th	5 th	6 th					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 # _____