

# CHESTER HEIGHTS BOROUGH PLUMBING PERMIT APPLICATION

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 \_\_\_\_\_

Email contact for fee: \_\_\_\_\_

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 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	6 <sup>th</sup>					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 # \_\_\_\_\_

Email permit to: [info@chesterheights.org](mailto:info@chesterheights.org) or call Borough Office at 610.459.3400